

2002

Massachusetts

COMMUNITY SERVICES BLOCK GRANT (CSBG) Performance Measure Report



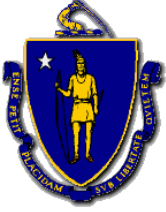
Department of Housing and Community Development

Massachusetts CSBG Performance Measure Report

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Commonwealth of Massachusetts

DEPARTMENT OF HOUSING & COMMUNITY DEVELOPMENT

Mitt Romney, Governor ♦ Kerry Healey, Lt. Governor ♦ Jane Wallis Gumble, Director

FROM THE DESK OF DIRECTOR JANE GUMBLE

I am pleased to present the fiscal year 2002 edition of the Community Services Block Grant (CSBG) Performance Measure Report. The Massachusetts Department of Housing and Community Development (DHCD) was able to operate yet another year of a successful CSBG program. CSBG, in combination with other public investments made by DHCD through a network of 25 community action agencies in Massachusetts, helped make a wide range of programs and services available for our residents. These services include, employment and training, housing assistance, transportation, childcare, health care, nutritional food assistance, and emergency services that are vital for moving the residents from poverty to self-sufficiency.

This report has been developed in an effort to display the accomplishments of DHCD, its network of community action agencies, and most importantly, of the residents who are part of the CSBG service delivery network. During fiscal year 2002, approximately 460,000 individuals received services through the CSBG network in Massachusetts – many of whom are children, youth, elderly and single-parents. In combination with \$14.7 million in CSBG funds, the network leveraged a total of an additional \$427.16 million in other federal, state, local, and private resources.

I acknowledge the commitment of the organizations that assist the department in fulfilling its mission of strengthening the state's cities, towns, and neighborhoods and enhancing the overall quality for life of its residents.

Sincerely,

A handwritten signature in blue ink, appearing to read "Jane Gumble", with a long horizontal flourish extending to the right.

Jane Wallis Gumble
Director

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INTRODUCTION AND BACKGROUND

Each year for the past three years, the Massachusetts Department of Housing and Community Development (DHCD) has been publishing a performance measure report to provide evidence of DHCD fulfilling its mission as well as meeting goals and purposes of the federal Community Services Block Grant (CSBG) program. Through a very successful network of non-profit Community Action Agencies (CAAs), DHCD demonstrates that this network of 25 CAAs is able to address poverty in a comprehensive way – helping many low-income residents move out of poverty toward self-sufficiency and in this process, meeting their emergency needs, assisting them among others, in finding jobs and housing, and involving them in the affairs of their respective communities. The purpose of this report is to measure the efficiency of CAA programs, particularly the CSBG, at three levels: individuals and family self-sufficiency, community revitalization, and agency capacity.

With the 1993 passage of the Government Performance Reform Act (GPRA), the CSBG Reauthorization Act in 1998, and the pending reauthorization in 2003, CAAs and state CSBG administering agencies are now required to implement performance measurement systems at every aspect of CSBG program operation, including community action planning. This report is primarily built upon this CSBG requirement, which is also known as the Results Oriented Management and Accountability (ROMA) process.

As background research, DHCD reviewed information from a number of sources, including the 2000 census. In addition to the 2000 Census, one of the key sources of information that DHCD reviewed was the data from the CAA Information System (IS) Survey that is developed jointly by CAAs and DHCD and submitted annually to the National Association for State Community Services Programs and the U.S. Department of Health and Human Services, Administration for Children and Families. DHCD reviewed individual CAA client and program counts from cities, towns and communities served by the CAAs in Massachusetts and compared CAA demographic and fiscal data, where applicable, with data for the last two or three fiscal years. Where available information permitted, an effort was made to identify and analyze client demographic trends as well.

All CSBG and other¹ grants provided by DHCD to CAAs were verified internally. Client demographic data was verified at local levels by CAAs. Furthermore, any variations in individual or family demographic characteristics² were verified with CAAs after reports were submitted to DHCD. DHCD expects to have the ability to create a statewide-unduplicated client demographic report

¹ Fuel Assistance, Weatherization, Community Food and Nutrition, and HEARTWAP.

² Gender, Age, Ethnicity/Race, Education level of adult, health insurance, disability, family type, family size, sources of family income, level of family income, and housing status.

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when a newly introduced Internet-based data collection system is fully implemented.

For program outcome data, DHCD relied on the six (6) CSBG National Goals and Outcome Measures³ developed by the Monitoring and Assessment Task Force (MATF) headed by the U.S. Department of Health and Human Services. CAAs reported on these National Goals and Outcome Measures and other outcome measures developed by DHCD for major programs such as, Head Start, Child Care, Nutrition, Women, Infants and Children, and First Time Homeownership programs. This allowed DHCD to capture consistent program-specific outcomes across the state.

The implementation of outcome measurement process and the overall Results Oriented Management and Accountability (ROMA) initiative for the CSBG program is a collaborative effort between DHCD and each of the 25 CAAs. As a result of this collaboration, each year, DHCD is able to implement outcome measurement process in a very comprehensive and methodic way. This collaboration also allows DHCD to undertake many joint efforts, such as CAA Information Technology capacity building initiative, scholarship programs for low-income residents, credentialing program for CAA staff, self-sufficiency programs, board and staff training on Results Oriented Management and Accountability (ROMA), computer donation for CAAs, and workforce development projects. Successes in each of these and future projects are crucial in the administration of CSBG program in Massachusetts - the result of which is better opportunities and improvements in the quality of lives of hundreds and thousands of low-income residents of the Commonwealth.

³ See Appendix 2: The National Goals and Outcome Measures

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ORGANIZATIONAL PROFILE

The Massachusetts Department of Housing and Community Development (DHCD) is a state agency established by Chapter 23B of the Commonwealth of Massachusetts General Laws. DHCD's mission is to strengthen cities, towns, and neighborhoods and enhance the quality of life of Massachusetts's residents. To accomplish this mission, DHCD provides leadership, professional assistance, and financial resources to promote safe, decent affordable housing opportunities, economic vitality of communities and sound municipal management. DHCD forges partnerships with regional and local governments, public agencies, community-based organizations, and the business community to achieve common goals and objectives. In all of these efforts, DHCD recognizes and respects the diverse needs, circumstances, and characteristics of individuals and communities. DHCD is committed to: programs and funding that target populations of low to moderate incomes and those with special needs; coordinated, integrated and balanced agency responses to address the comprehensive needs and interests of communities; programs and technical assistance designed to facilitate informed decision-making at the local level, and to encourage self-sufficiency of residents and communities; and sound business practices that ensure the highest standards of public accountability and responsibility. The agency annually invests approximately \$400 million in state and federal operating, capital, and trust funds, to address the Commonwealth's need for affordable housing, as well as community services and neighborhood development needs.

DHCD implements its mission of strengthening cities, towns, and neighborhoods and enhancing the quality of life of Massachusetts's residents through its Office of the Director, the Office of Administration and Finance, the Office of the Chief Counsel and four newly reorganized divisions: the Division of Community Services, Division of Housing Development, Office of Sustainable Development, and Public Housing and Rental Assistance. This reorganization is critical to DHCD's success in providing more efficient, expedited, and accountable services to its customers, which are: municipal governments, non-profit and quasi public organizations and many low and moderate income residents of the Commonwealth. As the lead state agency for housing and community development, this reorganization will also help DHCD to work more effectively by coordinating its activities and programs with other state and quasi-public agencies serving housing, economic development, transportation and environmental functions. Housing and Community Development works under the premise of Sustainable Development, which links housing, transportation, jobs, and environment all into a strategy of comprehensive development for the Commonwealth. This premise of sustainable development complements DHCD's recently completed strategic plan that identified the following three specific external goals: (1) promoting affordable housing production and preservation; (2) promoting healthy communities; and, (3) partnering.

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The Director of DHCD is appointed by the Governor of the Commonwealth to administer and maintain executive authority over all phases of departmental activities and coordinate policy with the Governor and the rest of the Administration. The Office of the Director includes the office of the Chief of Staff, the office of the Deputy Director for Policy Development, the communications office, the office of the Chief Counsel, and the office of Administration and Finance.

DHCD serves many residents, non-profit organizations, local housing authorities, private and non-profit housing developers, and many municipal governments across the Commonwealth. There are also several commissions and quasi-public agencies affiliated with DHCD such as, the Housing Appeals Committee, Commission on Indian Affairs, Manufactured Housing Commission, Community Development Finance Corporation, Community Economic Development Assistance Corporation, Massachusetts Housing, Massachusetts Crime Watch Commission, and the Massachusetts Housing Partnership Fund.

THE ADMINISTRATION OF CSBG FUNDS

The Department of Housing and Community Development (DHCD) became the administering agency for the implementation of the Community Services Block Grant (CSBG) program in Massachusetts in 1984. The Division of Community Services (formerly known as Division of Neighborhood Services) within DHCD houses the Community Services Block Grant (CSBG) program. Due to the recent reorganization, the Division of Community Services (DCS) has been able to consolidate federally funded community service programs such as CSBG, Fuel Assistance (LIHEAP), Weatherization Assistance Program (WAP), Heating Emergency Assistance Retrofit Task Weatherization Assistance Program (HEARTWAP), Community Development Action Grant (CDAG) and the Community Development Block Grant (CDBG) under the authority of one division head. This consolidation is intended to make better utilization of staff in core units, such as Administrative Support, Community Development, Community Services, Policy and Planning, and Financial and Compliance Unit.

Each year, on behalf of the Governor of the Commonwealth the DHCD Director provides written assurances to the Secretary of the U.S. Department of Health and Human Services that the state will meet assurances set forward in the Community Services Block Grant Act. Assurances are given in several programmatic and administrative compliance areas. Some of the selected major programmatic assurances are:

CSBG funds will be made available to remove obstacles and solve problems that block the achievement of self-sufficiency for eligible families and individuals that help to:

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- ▶ secure and retain meaningful employment;
- ▶ attain an adequate education, with particular attention toward improving literacy skills of low-income families;
- ▶ make better use of available income;
- ▶ obtain emergency assistance through loans, grants, or other means to meet immediate and urgent family and individual needs;
- ▶ address the needs of youth in low-income communities;
- ▶ achieve greater participation of low-income families and individuals in the affairs of the communities involved; and,
- ▶ to make more effective use of and coordination of CSBG with other programs.

To ensure compliance with these CSBG programmatic Assurances and other⁴ related administrative assurances and guidelines, DHCD established a community action planning and monitoring systems. Each CAA is required to develop a strategic or Community Action Plan, from which their annual CSBG grant application is developed. These three-year strategic plans, the two-year CSBG and Community Food and Nutrition Consolidated State Plan, and annual CSBG grant application and budget guide the implementation of CSBG in Massachusetts. A comprehensive monitoring system developed by DHCD last year guides the monitoring of the implementation of CSBG goals in Massachusetts.

Each year, DHCD receives CSBG funds from the U.S. Department of Health and Human Services, Administration for Children and Families, which in turn is distributed based on a historic funding formula to the Commonwealth's network of 25 Community Action Agencies (CAAs). During the federal fiscal year 2002 (October 1, 2001 through September 2002), Congress authorized approximately \$639.7 million in CSBG funds, of which \$635.9 million was distributed to States and U.S. territories – remaining funds were allocated to some of the states and territories, but under a tribal allocation category. During fiscal year 2002, Massachusetts' share of CSBG allocation was \$16.12 million – an eight percent (8%) or \$1.25 million dollar increase from the previous year. The Community Services Block Grant (CSBG) Statute mandates DHCD to distribute a minimum of 90% of this allocation to eligible entities, which are the 25 CAAs in Massachusetts. Of the remaining 10%, five percent (5%) is distributed among CAAs and other Community Based Organizations (CBO) as discretionary grants and a maximum of 5% of the total state allocation was retained for administrative purposes. DHCD allocated a total of \$14.5 million in CSBG funds directly to CAAs during fiscal year 2002, which were spent and reported by CAAs according to the following purposes⁵:

⁴ Only a summarized and edited version of the assurances is presented here. For a detailed listing of these assurances, see, Community Services Block Grant and Community Food and Nutrition Program Consolidated State Plan and Application – Fiscal Years 2003-2004, Massachusetts Department of Housing and Community Development, Boston, Massachusetts.

⁵ CSBG actual allocation of resources was consolidated into six major categories.

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- ▶ Achieving self-sufficiency (employment, education and literacy and housing related assistance) – 41%
- ▶ Providing emergency services and improving income management – 17%
- ▶ Improving health care and nutrition – 13%
- ▶ Creating linkages and coordination of services among anti-poverty initiatives– 17%
- ▶ Providing services for youths and seniors – 6.5%
- ▶ Other types of services including CAA capacity building development – 5.5%

In addition to the direct CSBG allocation to CAAs, DHCD granted a total of \$803,470 in CSBG discretionary funds to CAAs and other Community Based Organizations (CBOs) to implement many demonstration projects. Of the \$803,470 in CSBG discretionary funds spent, \$329,350 was awarded directly to CAAs and the Massachusetts Community Action Program Directors' Association (MASSCAP). An additional \$304,120 was spent on affordable housing and economic development activities that directly benefit low and moderate income families in Massachusetts. Of the remaining \$170,000, \$80,000 was spent on training and technical assistance and \$90,000 was for assisting homeless families to move out of temporary housing to stable and permanent housing. The distribution of the CSBG discretionary funds was as follows:

- ▶ Affordable housing and economic development projects – 28.53%
- ▶ Education and literacy for low-income residents – 13.61%
- ▶ Provision of emergency services - 11.20%
- ▶ Linkages and coordination of services among anti-poverty initiatives - 10.58%
- ▶ Housing assistance – 9.33%
- ▶ Outcome management training and technical assistance – 8.71%
- ▶ Income management for low-income clients – 8.59%
- ▶ Capacity building initiatives for DHCD grantees – 8.32%
- ▶ Youth development – 1.13%

As noted above, a maximum of five percent of the total CSBG allocation for Massachusetts is utilized to pay for DHCD's expenses directly related to the administration of the CSBG program including training and technical assistance and monitoring of grantee CAAs. During fiscal year 2002, CSBG administrative funds allowed DHCD to support 11 DHCD staff or 7.45 Full Time Equivalent (FTE) staff persons.

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STATUS OF RESULTS ORIENTED MANAGEMENT AND ACCOUNTABILITY (ROMA) IMPLEMENTATION

Following guidelines and an instrument provided by the U.S. Department of Health and Human Services, Office of Community Services, in May 2001, DHCD conducted a survey of Massachusetts CAAs to determine their *preparedness* in transitioning from service-based to results-based organizations. The survey indicated the strengths of Massachusetts CAAs in several *Core Areas* of their operations, such as: mission, transition to outcome management systems, program and fiscal record keeping, data collection, planning, and reporting. The survey also alluded to some major areas for DHCD to design its future training and technical assistance activities. Two such areas were: Board and staff training on the topic of ROMA and outcome measurement in general. One of the questions in the survey was designed to find out whether CAAs would accept future assistance to improve their program and fiscal operations – an overwhelming ninety-six percent (96%) of the CAAs responded positively. A thorough review of the CAA responses identified areas where improvements could be attributed to continued CAA training and technical assistance initiatives. DHCD reviewed these major findings and compared those with their current status within a two-year timeframe. This analysis is summarized as follows:

- ▶ As of May 2001, 25 out of 25 CAAs in Massachusetts reported that they have a mission that describes the CAA's role. During 2002, review of the CAA strategic or Community Action plans verified this assertion, although there were a few instances where DHCD required that CAAs revise their mission to make it more *in line* with CSBG program goals and purposes.
- ▶ Fourteen out of 25 CAAs indicated that they had made the transition to ROMA or outcome-based process - another 11 CAAs had set up a timetable for the transition. To date, all CAAs either have made the transition to ROMA or are in the process of completing this transition.
- ▶ During 2002, DHCD grant management specialists visited CAAs and learned about CAA community action planning, transition to outcome management, planning barriers, and involvement of non and limited English speaking community.
- ▶ As of May 2001, all 25 CAAs had program and fiscal record keeping systems in place. Eighty-eight percent (88%) of the CAAs indicated that they use quantifiable data to measure program outcomes. Data from the most recently available (2002) CSBG Information System Survey shows that 100% of the CAAs are using quantifiable data for outcome measurement.

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In May 2001, only 32% or 8 out of 25 CAAs reported that they used Scales and Ladders⁶ to measure client outcomes toward self-sufficiency. By the end of 2002, 56% or 15 CAAs were using Scales and Ladders to measure self-sufficiency, on a limited program-by-program basis. This progress can be attributed to two rounds of pilot CSBG Scales and Ladders grants offered by DHCD. Even though no additional funds are being allocated, DHCD continues to encourage CAAs to incorporate Scales and Ladders.

In spite of many successes, the survey identified some areas of concerns for DHCD in terms of CAA's *preparedness*. It was apparent from the survey, that only seven CAAs had the opportunity to provide staff training on ROMA, only a few CAAs provided formal board ROMA training. However, many CAA boards were aware of the need for transition to outcome-based management. In May 2001, only five CAAs reported that they had the opportunity for board training on ROMA and outcome management. In response to this need, DHCD applied and received a training and technical assistance grant from the U.S. Department of Health and Human Services, Office of Community Services⁷. The grant allowed DHCD to retain services from the New York – based Rensselaerville Institute to facilitate this training.

- ▶ The DHCD-sponsored Board ROMA training was offered to all 25 CAAs and all boards were able to complete formal ROMA outcome management training.
- ▶ During Fall 2001 and 2002, prior to the board training, the Rensselaerville Institute offered regional and one-to-one staff training and technical assistance on outcome measurement. By 2002, program staff and interested executive directors from all 25 CAAs completed a two-day long outcome management training.

DHCD has been addressing results oriented management in a statewide and coherent fashion, allowing CAAs to strengthen their identified assets and develop a comprehensive service delivery mechanism for low-income individuals and families. Over the years, DHCD approached the implementation of results oriented management by taking initiatives in areas such as, Information and Technology, training and technical assistance, innovative programs, and strategic or community action planning. The most recent DHCD initiatives have been in the areas of information technology capacity building or DHCD-CAA E-Government Network Project and Board ROMA training.

⁶ The Massachusetts Scales and Ladders is a matrix-based case management system that allows case managers at local CAAs to develop an intervention strategy for low-income clients using a tool that initially assesses and plots clients along a five-step process, i.e., In-Crisis, At-Risk, Safe, Stable, and Thriving.

⁷ For a detailed report, see page 11-13.

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DHCD-CAA E-GOVERNMENT NETWORK PROJECT

In late 2001, DHCD announced the development of a comprehensive software and service model for providing an Internet-based reporting and data analysis mechanism for DHCD and CAAs. Developed by *Community Networks Corporation*, a Massachusetts-based software company, this new system allows CAAs to connect to the Internet and complete fiscal, client demographic, and outcome-related data as part of their CSBG Information System report to DHCD. This project has been designed to meet the mandates of the ROMA Act of 1998, which calls for collecting and reporting unduplicated CAA client demographic data to the U.S. Department of Health and Human Services. DHCD designed the project specifications with the following two goals in mind: (1) accountability and data verification; and (2) process automation and paperless transactions.

For the first time, this report has been developed from data collected via this new Internet-based system. All 25 CAAs in Massachusetts were able to log on to a secure Internet site routed through DHCD's website (www.mass.gov/dhcd) and complete the survey. This new process of collecting data from CAAs has greatly improved DHCD's data analysis and reporting capacity; with a hope that future enhancements to this system will further improve reporting and verification of CAA data. Actually, DHCD has begun the enhancement process by adding the following three (3) new features to the existing Internet-based system – (1) online transactions of CSBG annual budgets and ROMA workplans; (2) online reporting of Low Income Heating and Energy Assistance Program (LIHEAP) monthly client and expenditure data; and (3) annual reporting of energy consumption data. All of these enhancements are being developed using the existing Internet-based secure system.

The development and the full implementation of this Internet based system is critical for a number of reasons. First, creation of a statewide Internet-based network has allowed DHCD and CAAs to highlight meaningful data and demonstrate the effectiveness of not only the CSBG program but also the Massachusetts CAAs as a network. Full implementation of this project will help both DHCD and CAAs to remain at the forefront by sharing information with the CAA network, legislators and other interested parties. Secondly, this new system has allowed DHCD and CAAs to review submitted fiscal, demographic, and outcome data in a more comprehensive manner, streamlined reporting, and has established a paperless transaction between DHCD and CAAs. The recent enhancements will bring the LIHEAP program *in par* with the current method of CSBG program reporting.

This new system has the ability for CAAs to transmit encrypted unidentifiable client demographic data from their client databases. Once implemented, this feature will make the existing system much more efficient and meaningful - several agencies have expressed interest and DHCD is working

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with them in completing the testing phase of this part of the project. At the same time, some CAAs have also questioned the idea of transmitting unidentifiable data to DHCD citing client confidentiality as an issue/barrier.

BOARD ROMA TRAINING & TECHNICAL ASSISTANCE

During 2001, DHCD received \$35,300 in a Training and Technical Assistance grant from the Office of Community Services (OCS), U.S. Department of Health and Human Services. These funds were distributed to two organizations: The Rensselaerville Institute (TRI) for ROMA board training and the Massachusetts Community Action Agency Program Director's Association (MASSCAP), the state CAA association, for an interactive ROMA web forum. The project focused on the Board of Director's function and capacity by providing ROMA training to CAA boards. The training focused on overall board roles and responsibilities, principles of ROMA, the roles and responsibilities of the Board in the development and implementation of ROMA, and applicability of ROMA in Community Action Planning.

- ▶ The Rensselaerville Institute conducted the on-site Board ROMA training for 15 agencies, Action for Boston Community Development (ABCD), Berkshire Community Action Council (BCAC), Cambridge Economic Opportunity Council (CEOC), Community Action, Inc., (CAI), Community Action Committee of Cape Cod and Islands (CACCCI), Citizens for Citizens (CFC), Community Teamwork Inc. (CTI), Greater Lawrence Community Action Council (GLCAC), North Shore Community Action Programs (NSCAP), People Acting in Community Endeavor (PACE), Self-Help, Inc. (SHI), South Middlesex Opportunity Council (SMOC), Springfield Partners for Community Action (SPCA), Valley Opportunity Council (VOC), and Worcester Community Action Council (WCAC). DHCD staff accompanied The Rensselaerville Institute consultant to the on-site ROMA trainings to ensure that CAAs were getting accurate and appropriate information. In fact, DHCD Program Representatives assigned to the each of the 15 CAAs where the trainings took place held conference calls with TRI prior to the on-site trainings to ensure that all the trainings were designed taking into consideration the particularities of each Board of Directors.
- ▶ On November 12 and 13, 2002, The Rensselaerville Institute conducted the two (2) Facilitator's Briefing sessions. The Facilitator's Briefings sessions were very specific in their focus on preparing people to present the Board training. A Facilitator's Guide for the Board Training was provided to jot down notes and to capture the significant points that should be made when presenting the material to boards. The Facilitators Briefing sessions were very successful. All

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ten (10) CAAs that did not receive on-site ROMA Board training attended the Facilitators Briefing Sessions. An additional four CAAs participated in the training (NSCAP, CEOC, SHI, and SPCA) as well.

- ▶ MASSCAP also provided support by developing/deploying information and a discussion forum capability to the MASSCAP Web site for use in training Boards of Directors for Massachusetts CAAs on the implementation of ROMA practices.

The training was designed to have several beneficial impacts: an effective dialogue between Board and staff; improved community needs assessments; enhanced understanding by the Board and staff of agency priorities; improved community action planning; better program development and implementation; and the overall improvement in ROMA implementation. Staff from DHCD discussed and analyzed a tentative agenda for the ROMA training for boards. Changes to the original agenda were made to meet individual needs from CAAs (e.g. more emphasis was placed on how to use general outcome management in roles and responsibilities of the Board).

MASSCAP, the state CAA association received \$10,000 of the OCS Training and Technical Assistance grant to develop an online ROMA web content and an interactive forum in MASSCAP's website. The text of the interaction in the forum is being archived and is accessible to any board member.

LESSONS LEARNED

To date, the DHCD-CAA E-Government Project has been successful in meeting the initial project goals. Presuming the potentiality for violating client confidentiality and privacy laws, some CAAs have questioned the idea of transmitting unidentifiable client demographic data to DHCD. Once implemented, this new method of data collection and reporting will create a statewide-unduplicated client demographic report. This is probably the easiest and most cost effective way to ensure statewide verification and un-duplication of client demographic data.

The Board ROMA training was more difficult to implement than originally envisioned. The funds available were limited to accommodate all 25 CAAs' requests for the training. Besides, since Board members are volunteers who for the most part work during the day and have personal obligations in the evening, their availability for trainings and workshops was very limited. Also, the possibility of holding trainings outside each CAA's service area was not feasible. Furthermore, some board members were not available during the summer months. While DHCD's goal was to complete all of the on-site ROMA trainings by September 2002, three agencies experienced circumstances that either prevented them from holding the training within this timeframe or requested a postponement of their training to maximize its impact on their CAAs. As a result,

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DHCD requested and received a “no cost” grant extension from the U.S. Department Health and Human Services, Office of Community Services. Due to the extension, DHCD was able to complete all 15 on-site trainings and the two *Train the Trainers* sessions as planned.

DEMOGRAPHIC CHARACTERISTICS OF PEOPLE SERVED

According to published reports from 2000 Census, Massachusetts’s total population in April 2000 was approximately 6.35 million. Compared to 1990 Census, the Massachusetts population grew by 5.53% or by 332,672 people. During these 10 years, the Cape and Islands region experienced the highest population growth. Cape Cod and the Islands grew at the rate of approximately 35.4% while the Berkshire county region experienced a negative growth rate. However, based on it’s 2001 population of 6.37 million people, Massachusetts ranked 13th in the nation in terms of population growth. In terms of Per Capita Personal Income, Massachusetts ranked 3rd – in 1991, the state ranked fifth in the nation in terms of Per Capita Personal Income (PCPI)⁸. During the last decade, the Per Capita Personal Income in Massachusetts grew by \$15,193 – the average growth rate for PCPI was 5.1%. The median household income, during the last five years, increased by \$5,321. The overall poverty rate has decreased over the last 10 years, but it remained at 6.7% for Massachusetts’s families⁹.

CAAs collected individual and family level demographic characteristics of clients served by the CAA and reported to DHCD in January 2003, for services provided during the months of October 1, 2001 through September 30, 2002.

During this period, a total of 460,262 unduplicated¹⁰ numbers of individuals from 261,991 families received services from the 25 CAAs in Massachusetts. There has been a 33% increase in clients served by CAAs during fiscal year 2001. Compared to the previous year, CAAs reported 78,037 more individuals in fiscal year 2002. This trend is consistent with increases in CAA clients from the previous fiscal years. Except for in 2001, when DHCD observed a 30% growth in CAA clients due to inclusion of additional data from households that receive Fuel Assistance benefits. Even discounting this one time upsurge, there has been a steady increase in CAA client volume.

As families account for a significant number of CAA clients, the following table may be helpful in understanding types and size of families assisted by CAAs in Massachusetts.

⁸ Regional Economic Accounts, Bureau of Economic Analysis, U.S. Department of Commerce, <<http://www.bea.doc.gov/bea/regional/bearfacts/action.cfm>>

⁹ Census Bureau figures show individual poverty rate at 9.3% in 1999. MISER analysis of sample data shows family poverty rate at 6.7% in 1999.

¹⁰ CAAs were able to collect one or more demographic characteristics from 94% of these individuals. For families the collection rate was 92%. Report is based on CAA-by-CAA unduplicated aggregate data.

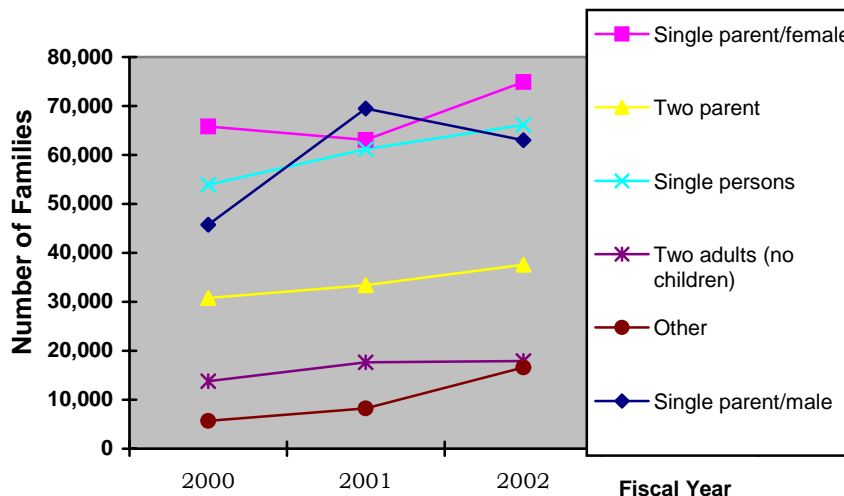
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Table 1: Selected Family Demographic Characteristics

Family Type	% of Families	Family Size	% of Families
Single parent/female	34%	One person ¹¹	34%
Single parent/male	3%	Two persons	22%
Two-parent	17%	Three persons	18%
Single person	30%	Four persons	13%
Two adults no children	8%	Five to seven persons	10%
Other	7%	Eight or more persons	1%

Further analysis of family type and family size indicates some noticeable trends. For example, there were almost 11,887 more single parent female head of households in CAA client base in fiscal year 2002 than in 2001. This is almost an 18% increase after a drop in single parent female head of households in 2001, compared to 2000. Women comprised 62% of all individual clients served in Massachusetts and the composition remained unchanged during the last three years. During the last three years, however, DHCD noticed a steady increase in two-adults (no children) and “other” types of households. Between 1999 and 2002, households that identified themselves as “other” have increased dramatically – there has been a three-fold increase in “other” types of households. The following chart further illustrates trends in family type among CAA clients in Massachusetts.

Chart 1: Trends in Family Types – 2000 through 2002



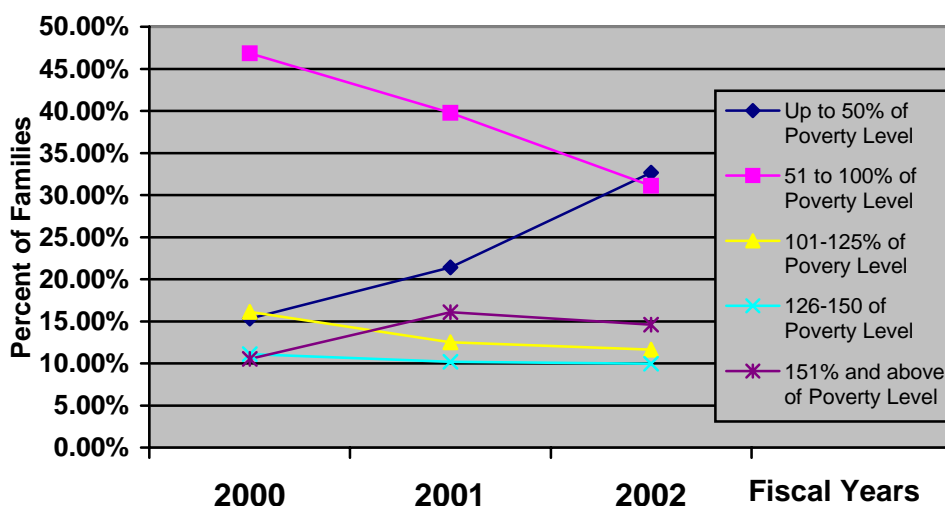
¹¹ There is a small variance due to under counting of single person families.

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There has been an increase in client volume in all types of families. However, there were some noticeable trends in terms of income levels of these families. DHCD's analysis shows that more and more families who are defined as "very low-income" are receiving assistance from CAAs. At the same time, the number of families who fall within other income ranges¹² are decreasing. Between 2000 and 2002, CAA client families who are defined as "very low-income" increased by almost 100%¹³. In fiscal year 2000, only 15% of families served by CAAs had an income below 50% of federal poverty guidelines, by 2002, 33% of all families served had an income within the same range.

The following chart illustrates the trends in family income among CAA client families in relation to the federal poverty guidelines.

Chart 2: Trends in Family Income Level (HHS Poverty Guidelines)



A majority of the families reported here were families with children – almost 54% of all families reported had at least one child in the household. Those families are either single parent/female or male head of household or two-parent household.

Children continue to remain as a major client group for CAAs in Massachusetts. During fiscal year 2002, CAAs served a total of 162,811 children under the age of 18, which is more than 35% of all individual clients served and almost 40% of all individual clients from whom age was calculated. The client population for this age group had been increasing steadily. DHCD observed a 53% increase in under 18 population during fiscal year 2002. Most of the increase was due to increases in 6-11 and 12-17 age groups. Even after

¹² 51-75%, 76-100%, 101-125%, 125-150%, and 151% and above of U.S HHS issued federal poverty guidelines.

¹³ Data for this income group was not collected and reported before 1999. Very low-income is defined as families with an income at or below 50% of the federal poverty level.

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accounting for the overall increase in client volume during fiscal year 2002, this increase can be estimated around 27%.

Among others, CAA client families also report their sources of family income from a pre-selected list. The family income source list includes: Temporary Assistance for Needy Families, Supplemental Security Income, Social Security, Pension, General Assistance, Unemployment Insurance, Employment, etc. They also report whether families had no income or not. Each year, DHCD reviews sources of family income information to identify trends among CAA client families, especially who are receiving some types of public assistance. Some of the benefit areas are: income from TANF and General Assistance.

During fiscal year 2001, DHCD observed that there was a real increase in number of families who were employed but also received some type of public assistance and/or retirement benefits. This year, there was a noticeable increase in families receiving unemployment benefits. After accounting for an increase in client volume from fiscal year 2001 to 2002, it was calculated that there were at least 1,700 additional CAA client families reporting unemployment insurance as one of their sources of income. After accounting for increases, there were an additional 3,500 families who reported TANF as their income source¹⁴, indicating a growing trend that more and more TANF recipient families are receiving services from CAAs. On the other hand, there has been a drop in families who are employed but also have been receiving public assistance or some type of retirement benefits. There were almost 12,000 fewer families in this category.

Even though, CAAs only track education levels of adult individual clients,¹⁵ client demographic reports from the last three years show the following trends:

- ▶ There was an increase among individual clients with 9-12 grade education, i.e., non high school graduates.
- ▶ The largest group of individual client was high school graduates or clients who had a GED diploma.
- ▶ During the last three years, there was virtually no increase¹⁶ among clients with less than 9th grade education and 12th grade plus some post secondary education. In fact, the total number of clients for this category dropped slightly during last year.

As far as housing status of CAA client families is concerned, the proportion between homeowner and renter families remained largely unchanged

¹⁴ Aggregated data does not allow DHCD to identify new clients.

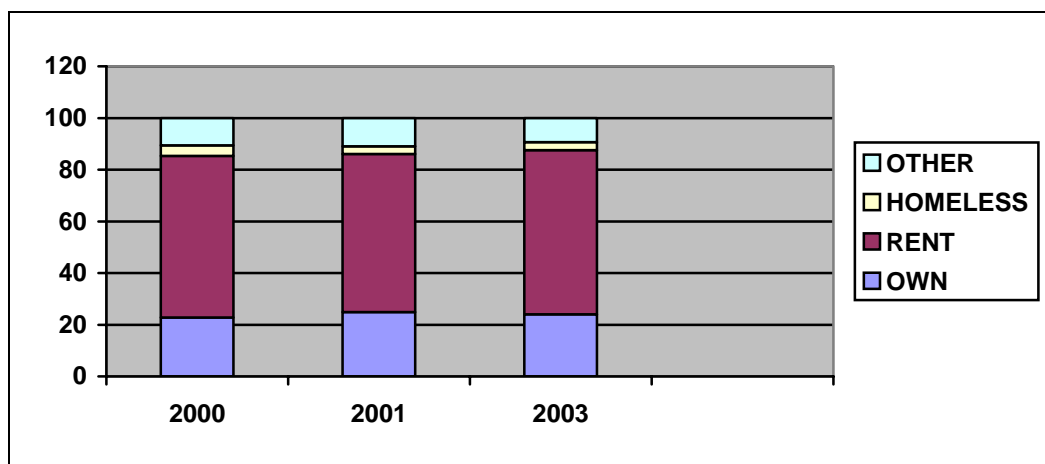
¹⁵ 25 years of age or older.

¹⁶ After accounting for increase in client volume.

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at 1:3. In other words, for each homeowner family there were three renter families that received services from CAAs. The family housing status, in terms of homelessness, remained largely unchanged after a drop in fiscal year 2001 from the previous fiscal year. During 2002, three percent (3%) of families served by CAAs reported that they were homeless – a total of 5,969 families reported that they were homeless at the time of receiving services. The following chart may help understand these trends in family housing status:

Chart 3: Trends in Housing Status of Families



As noted before, the housing status of families receiving services from CAAs remained largely unchanged, especially for renter and homeowner families. For example during the last three years, homeowners and renters comprised approximately 24% and 62% of client families respectively. As shown in the chart above, there has been a small drop in homeowner client families in 2002, compared to 2001. Between 2000 and 2001, homeowner families in the CAA client pool increased by two percentage points. Change in number of homeless families was insignificant as well in 2002. DHCD noticed a one percentage point decrease in homeless families in the CAA client pool between 2000 and 2001 though. This change translates into 1,450 families. It remained mostly unchanged from 2001 to 2002 – CAAs reported only 226 more homeless families in 2002.

When compared, the family housing status of CAA clients with all Massachusetts families, a striking but obvious dissimilarity was observed. According to the 2000 Census, the homeownership rate for Massachusetts was 61.7% as opposed to 24% as shown among CAA client families. DHCD further reviewed housing status of a representative sample of CAA client families as reported by CAAs to identify any regional trends that stand outside the statewide average. This analysis is grouped into homeowners, renters, and homeless and is presented in the following tables:

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Table 2: Percent of Families Receiving Services (homeowners)

<u>Top Five Regions¹⁷</u>	<u>Percent of Families</u>
1. South Shore	46.27%
2. Franklin & Hampshire Counties	32.01%
3. Southeast & Brockton areas	31.01%
4. Central Massachusetts	29.30%
5. Hampden County	28.16%

Table 3: Percent of Families Receiving Services (renters)

<u>Top Five Regions</u>	<u>Percent of Families</u>
1. Boston	88.44%
2. Chelsea/Lynn	75.87%
3. Cambridge/Somerville & Tri-City areas	75.57%
4. Merrimack Valley	64.54%
5. Franklin & Hampshire Counties	63.00%

In terms of homeless families, the Cape and the Islands region reported the highest percentage of families who considered themselves homeless at the time of receiving services, followed by Gloucester/Cape Ann/North Shore, Central Massachusetts, and Cambridge/Somerville and Tri-City areas.

DHCD analysis identified the following additional client demographic characteristics:

- ▶ Only 6.65% of adults (25 years or older) receiving services from CAAs had a 2 or 4 year college degree. The vast majority of adults who are receiving services are high school graduates or have a GED and some post secondary education.
- ▶ Eighteen percent (18%) of CAA individual clients reported that they had no health insurance coverage.
- ▶ Forty five percent (45%) of all individual clients were ethnic minorities (Black, Hispanic, Native American/Alaskan, and Asian/Pacific Islanders).

¹⁷ Not all cities and towns within each region are represented here.

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- ▶ Fifteen percent of CAA client families reported that they had no income source to report.
- ▶ Almost one third of families receiving services are single parent female head of households, followed by single persons who comprised another 30% of all households.

CAA RESOURCE DEVELOPMENT

Each year, CAAs in Massachusetts receive millions of dollars in federal, state, local public and private resources. CSBG is only a small portion of grants and funds received by CAAs. However, CSBG is a core funding source for CAAs and allows them to operate many direct service programs in their respective communities. During 2002, CAAs in Massachusetts leveraged a total of \$ 427.16 million from non-CSBG federal, state, local public and private sources. After many years of consistent increase, fiscal year 2002 evidenced a \$35.4 million or 7.67% decrease in non-CSBG funding from the previous fiscal year. This decrease in federal resources was accounted for primarily due to a one-time increased allocation of federal Fuel Assistance funds during 2001, which was not available in 2002. But 2002 also evidenced increases in many major federal programs. Compared to 2001, CAAs in 2002 reported significantly more funding from Head Start and Early Head Start, Temporary Assistance to Needy Families (TANF), Child Care Development Block Grant (CCDBG), and Section 8 subsidized housing programs. At the same time, funding from state sources decreased by approximately \$4 million. Decreases in state funding were noticed in state health, Head Start, Senior, and other programs. CAAs reported fewer state dollars in almost all¹⁸ of the state resource categories. At the same time, CAAs reported increased funding from nutrition, education, and transportation-related initiatives.

The following tables show major changes in federal and state program funding.

¹⁸ Day care and early childhood, health care, youth development, employment and training, and programs for seniors.

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Table 4: Changes in CAA Federal Funding – 2001 Vs. 2002

Programs/Sources	Difference (2002-2001)
Community Services Block Grants (CSBG)	\$ 1,403,900.00
LIHEAP – Fuel Assistance	\$ (33,302,286.00)
LIHEAP - Weatherization	\$ 498,439.00
Head Start and Early Head Start	\$ 8,671,877.00
Older American Act	\$ (205,811.00)
Social Services Block Grant	\$ (283,691.00)
Medicare/Medicaid	\$ (371,748.00)
Temporary Assistance to Needy Families	\$ 10,319,463.00
Child Care Development Block Grant	\$ 1,448,833.00
Women Infants and Children (WIC)	\$ (639,680.00)
Non Food Programs - USDA	\$ (363,852.00)
Food Programs - USDA	\$ (233,160.00)
Section - 8 Housing Program	\$ 5,106,906.00
Other Housing & Homelessness Programs	\$ (601,508.00)
Employment and Training Programs	\$ 633,410.00
Corporation for National Services Programs	\$ 245,190.00

Table 5: Changes in CAA State Funding

Programs/Sources	Difference (2002-2001)
Housing and Homeless Prevention Programs	\$ (1,325,050.00)
Nutrition Programs	\$ 1,175,513.00
Day Care and Early Childhood Education Programs	\$ (53,705.00)
Energy Programs	\$ 262,858.00
Health Programs	\$ (1,494,993.00)
Youth Development Programs	\$ (819,899.00)
Employment and Training Programs	\$ (181,127.00)
Head Start Program	\$ (1,266,102.00)
Programs for Senior Citizens	\$ (1,258,085.00)
Transportation Programs	\$ 1,912,993.00
Education Programs	\$ 519,937.00

As in previous years, the U.S. Department of Health and Human Services remained the largest federal funding source, followed by the Department of Housing and Urban Development, Department of Energy, and Department of Agriculture. CAAs in Massachusetts reported more than \$200 million in funding from the U.S. Department of Health and Human Services. The top five HHS

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funding sources were: Head Start, Fuel Assistance, Child Care Development Block Grant, CSBG, and TANF.

Despite some negative changes in federal and state funding, CAAs leveraged \$17.44 million in public sector resources. Compared to the previous year, this is a \$4.1 million increase. The largest increase was noted in unrestricted funds from local governments.

These changes have also affected the ratio between CSBG and non-CSBG dollars, an important CAA resource development indicator. On average, for each CSBG dollar spent, CAAs leveraged twenty-nine other dollars, a 12% drop from the previous year.

Volunteerism is one of the major features of any non-profit operation. DHCD's analysis showed a steady growth¹⁹ in volunteer activities during fiscal year 2000 through 2002 period. During fiscal year 2002, CAAs reported a total of 559,687 in donated volunteer hours. A majority of the CAAs reported a steady growth in this area for the last four years. These volunteer hours equal to approximately 316 Full Time Equivalent (FTE) jobs²⁰ and most of these volunteer hours were reported through CAA Head Start programs. CAA reported 13,709 more volunteer hours in fiscal year 2002 than they reported in fiscal year 2001.

Head Start accounts for a major portion of Massachusetts CAAs' funding from the federal government. During fiscal year 2002, CAAs reported a total of \$71 million in Head Start and Early Head Start funds from the federal government. Further analysis showed that in 2002, this was almost 30% of all non-CSBG federal funds reported by the CAAs. Nineteen²¹ out of 25 CAAs in Massachusetts reported Head Start program, and some of them also have an Early Head Start program. Besides providing early childhood education and preparing children for elementary school, Head Start in Massachusetts, like other states often helps families meet their many other immediate challenges. For example: helping families become stabilized in a post emergency situation. DHCD estimated that a total of 8,856 children experienced healthy growth and development and their families were strengthened through participation in the Head Start program in Massachusetts during 2002.

Overall, resource development from non-federal sources remained strong among Massachusetts CAAs. For each CSBG dollar invested, the CAA network in Massachusetts leveraged \$13.06 from non-federal sources. Even though this ratio has dropped by a dollar in 2002, it still remains significantly high compared to nationwide average. The following chart and table show CAA funding from various private sector sources during a two-year period:

¹⁹ An average growth rate of 13% for the last four years. Future growth cannot be projected from this analysis.

²⁰ Based on average weekly hours in private non-agricultural industries. The Economic Report of the President, United States Government Printing Office, Washington DC, February 2003.

²¹ 18 out of 25 CAAs directly operate a Head Start program. One CAA reports Head Start funding as a pass through.

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Chart 4: CAA Private Sector Resources in 2002

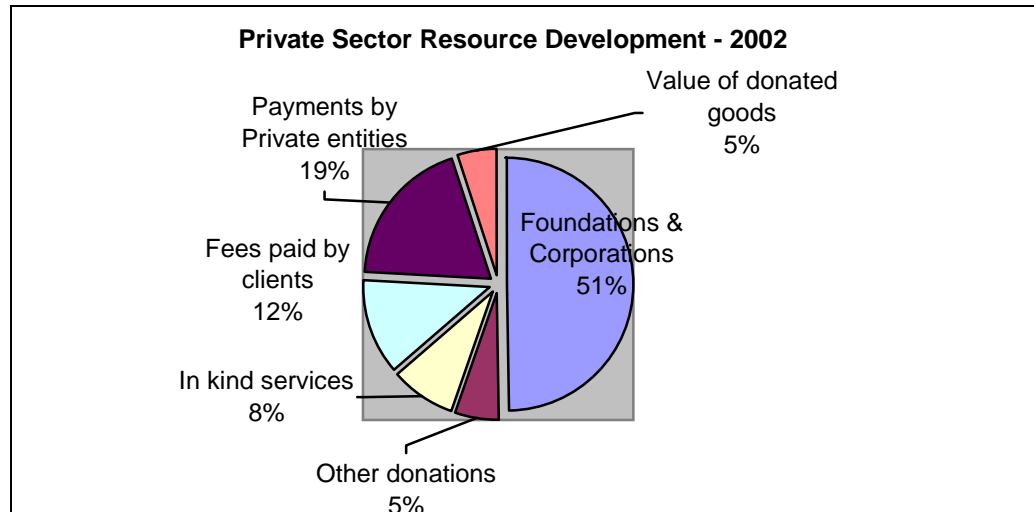


Table 6: CAA Private Sector Resources – 2002 and 2001

Private Resources	Fiscal Year 2002	Fiscal Year 2001
Foundations & Corporations	\$ 17,176,460	\$ 16,837,998
Other Donations	\$ 1,885,331	\$ 1,369,705
In-Kind Services	\$ 2,874,071	\$ 2,361,692
Fees Paid by Clients	\$ 4,209,840	\$ 9,392,810
Payments by Private Entities	\$ 6,642,893	\$ 8,757,165
Value of donated goods	\$ 1,749,692	\$ 1,572,921

For each federal CSBG dollar invested, CAAs leveraged \$10 from the state, \$1 from local public, and \$2 from private sources. In other words, for each CSBG dollar, CAAs raised \$2 from non-governmental sources. Almost one half of the private investments came from foundations, corporations, and other private non-profit organizations. CAAs remained highly reliant on government funding, but private sector contribution was also significant – over the last three years, CAAs leveraged approximately \$35 million each year from the private sector.

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EVIDENCE OF INDIVIDUALS AND FAMILIES MEETING THEIR NEEDS AND MOVING TOWARDS SELF-SUFFICIENCY

DHCD has been collecting and reporting on program outcomes since 1997. This would not have been possible without CAAs taking significant strides in making outcome measurement work in Massachusetts. CAAs in Massachusetts report on the six National Goals and Outcome Measures that were developed by the Monitoring and Assessment Task Force created under the leadership of the U.S. Department of Health and Human Services. For the most part, CAA reported outcomes were generated from all programs and activities, not just the CSBG funded ones. Through CSBG program progress and Information System reporting process, CAAs report on these National Goals and Outcome Measures as well as other outcomes developed by CAAs and DHCD. The results of this outcome measurement process have been summarized and presented to demonstrate the effectiveness of CAA programs in moving low-income people towards self-sufficiency. The information²² presented here has been categorized for clarity into: Self-Sufficiency; Employment; Housing Services; Literacy and General Educational Development; Family Stability; Other Needs; Children's Services; Advocacy and Volunteerism; Community and Partnership Building; and Capacity Building and Effects of Capacity Building.

Self-Sufficiency

There were 8,081 clients (individuals and families) who reported that they are more self-sufficient since participating in agency services.

Employment

- Three thousand one hundred sixty-five (3,165) out of 4,990 youths who were looking for a job obtained employment.
- One thousand eight hundred forty-one (1,841) adults obtained employment. In addition, 1,033 adult individuals reported that they maintained employment for a full 12 months.
- The CAA network helped adult members in additional 698 families to obtain employment.
- Three hundred twenty (320) households and individuals increased their hours of employment and income because of earnings from employment.

²² Results presented here were reported by CAAs in February 2003, for the reporting period of October 1, 2001 through September 30, 2002. This is not a complete list of all results reported to DHCD by CAAs, only the National Goals and Outcome Measures and some major "other" outcomes are reported here.

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Housing Services

- Three thousand eighty-six (3,086) Massachusetts families moved from substandard to stable standard housing. There were additional 791 individuals who reported that CAAs helped them improve their housing conditions by moving them from substandard to stable housing.
- Additional 824 families improved their housing situation either by maintaining the stability of their current housing or by moving them out of their current housing.
- CAAs helped 377 families and individuals to move from homeless or transitional housing into stable standard housing.

Literacy and General Educational Development (GED)

- One thousand thirty-three (1,033) participants progressed towards literacy and/or their GED during the past year. Participants included youth, families, and adult individuals.
- Additionally 3,705 participants made progress towards post secondary or vocational training.
- Three thousand seven hundred and twenty-eight (3,728) students were prevented from dropping out due to tutorial assistance.
- One thousand nine hundred forty-seven (1,947) youths learned about college planning.
- Three thousand seven hundred and twenty-eight (3,728) students were prevented from dropping out of school due to tutorial assistance. Additional 1,947 youth increased their knowledge about college planning.

Family Stability

- Two thousand seven hundred fourteen (2,714) aged households maintained an independent living due to agency services. In addition, there were 1,292 disabled or medically challenged persons who maintained an independent living situation.
- Three hundred ninety one (391) households and individuals owned a house or actively participated in the management of their housing.

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Other Needs

- There were 125,293 households whose emergency needs were ameliorated - 5,834 of which were elderly and 13,046 of which were high consumption households. There were 18,735 additional individuals whose emergency needs were ameliorated.

- Seventy six thousand fifty-one (76,051) high-energy consumption households realized a reduction in energy burden through fuel assistance, weatherization, and other energy assistance programs.
- CAAs increased availability and affordability of essential services, e.g. transportation, medical care, child care for 12,302 individuals and 1,866 families or households.
- Three thousand seven hundred eighty-eight (3,788) people increased their knowledge about consumer issues. One CAA resolved 301 consumer complaint and consumers recovered \$285,297 due to assistance offered by the same CAA.
- A total of 39,846 individuals requested assistance that resulted in increased access to resources.

- Twenty two thousand four hundred sixty-two (22,462) women improved their pre-natal health and the health of their young children through participation in the Women, Infants, and Children (WIC) program.

- Eighteen thousand five hundred seventy (18,570) individuals increased their access to health insurance, health screening, and information related to personal health²³.

- Twenty three thousand seven hundred eighty-three (23,783) families increased their access to fresh and nutritious food and nutritional education. There were an additional 4,298 individuals who also increased their access to fresh food and nutrition education.
- Tri-CAP (Malden, MA) made 17,035 summer lunches available for school aged children.

²³ These outcomes were generated from projects that deal with health screening for children, enroll adults and children in MassHealth, and reduce the effects of second hand smoke among participants.

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Children's Services

- One thousand four hundred ninety-five (1,495) families or households with children²⁴ have experienced an increase in children's involvement in extracurricular activities.
- A total of 8,856 children experienced healthy growth and development and their families were strengthened through participation in the Head Start program.
- Seven thousand eighty-four (7,084) parents were able to train for, seek, and obtain employment due to availability of child or day care services.
- A total of 10,513 children were able to access day care programs due to availability of day care vouchers.

Advocacy and Volunteerism

- Six hundred thirteen (613) low-income people participated in advocacy and intervention activities regarding funding levels, distribution policies, oversight, and distribution procedures for programs and funding streams targeted for the low-income community.
- One thousand nine hundred and forty-two (1,942) households or families participated or volunteered in one or more groups.
- One hundred sixty (160) elderly people increased their experience in community volunteering – there were 42 Latino residents who considered themselves part of the Latino community.
- Eighteen (18) households with HIV/AIDS were able to strengthen their family and other support systems in the community.
- One hundred two (102) households and 746 individuals reported that there had been an increase in donation of time to volunteer activities. More than 80% percent of these individuals were seniors working as volunteers in many CAA programs.

²⁴ Majority of these households were reported from children and early youth-related programs operated by five CAAs.

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Community and Partnership Building

- One thousand six hundred sixteen (1,616) households and 1,966 individuals believed that the agency has helped improve the conditions in which they live.

- Action, Inc. (Gloucester, MA) created 65 accessible living wage jobs in the community. The same CAA reported an increase in the proportion of state and federal funds allocated for meeting emergency and long-term needs of the low-income population by \$697,000.
- The housing stocks in ABCD's (Boston, MA), CAI's (Haverhill, MA), and WCAC's (Worcester, MA) communities were increased by 109 units through new construction.
- Thirty four (34) individuals received certification that will allow them to de-lead houses with children.
- QCAP, Inc. (Quincy, MA) maintained availability and affordability of 53 housing units.

- Action, Inc. (Gloucester, MA) helped bring \$12.5 million in "community investment" into the community that was targeted to low-income people.

- Five thousand four hundred twenty-three (5,423) households moved from cultural isolation to involvement with their cultural community.

- Nine hundred (900) partnerships were established and/or maintained with other public and private entities to mobilize and leverage resources to provide services to low-income people.

- One hundred seventy seven (177) partnerships were established and/or maintained with other public and private entities to complete the continuum of care for low-income people.
- ABCD (Boston, MA) made 42 Head Start slots available due to partnerships with other service providers.
- Due to collaboration with state agencies and community-based organizations, CACCCI (Hyannis, MA) made childcare resource available for 675 families.

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Capacity Building and Effects of Capacity Building

- Action, Inc. (Gloucester, MA), BCAC, Inc. (Pittsfield, MA), CEOC, Inc. (Cambridge, MA), CTI (Lowell, MA), HCAC, Inc. (Northampton, MA), GLCAC, Inc. (Lawrence, MA), NSCAP, Inc. (Peabody, MA), PACE, Inc. (New Bedford, MA), and VOC, Inc. (Holyoke, MA) mobilized a total of \$28.9 million to provide services to low-income people. These resources were mobilized primarily to provide linkages and coordination, housing, and emergency services.
- Four hundred sixty (460) families had their situation improved because of comprehensive developmental services.
- Four thousand five hundred twenty-two (4,522) individuals representing special populations showing improvement because of programs aimed at that population.
- CAI (Haverhill, MA) increased its unrestricted funds by \$19,316, which was within 96% of the agency's targeted goal.
- At ABCD (Boston, MA), 286 staff increased their knowledge about basic family planning.
- Thirty computer stations at NSCAP (Peabody, MA) now have better record keeping capacity due to software enhancements.
- CFC, Inc. (Fall River, MA), GLCAC, Inc. (Lawrence, MA), MOC, Inc. (Fitchburg, MA), QCAP, Inc. (Quincy, MA), and Tri-CAP, Inc. (Malden, MA) were able to enhance their community technology centers using 30 DHCD-donated surplus computers.
- An additional five CAAs²⁵, CACCCI (Hyannis, MA), CAI (Haverhill, MA), CAAS, Inc. (Somerville, MA), FCAC (Greenfield, MA), and WCAC, Inc. (Worcester, MA) increased low-income people's and CAA staff members' access to computer technology due to availability of DHCD-donated surplus computers.

²⁵ Additional 30 computers were donated to enhance client and staff access to technology in homeless shelter, children and family services, senior services, Latino youth programs.

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EVIDENCE OF PROGRAM INNOVATION

University High School (UHS) for Youth in Boston

Action for Boston Community Development, Inc.'s (ABCD - Boston, Massachusetts) University High School (UHS) has been in operation since 1993. Each year, the program serves at least 100 low-income inner-city youth between the ages of 16-22, and helps them complete a curriculum approved by the Boston Public Schools. These students represent a cross section of Boston's urban areas. Fifty six percent (56%) of the students are female and 44% male. The ethnic composition of the students is as follows: 63% African American, 13% Caucasian, 13% Hispanic, 1% Asian, and 10% other. The youth enrolled in the school were either expelled from their assigned high-school, failing, on the verge of dropping out, or had dropped out of school. Over 20% of the youth are pregnant or parenting; 15% are court involved; 7% are homeless; and many are victims of violence at home and or on the streets.

The issues that these students have had to deal with are not unusual amongst low-income, inner city, minority teenagers. What is most encouraging about these students is that when given the opportunity, they have shown a desire and ability to learn and work through all of the distractions and hardships in their lives. With the alternative educational structure that the University High School provides, students are provided with a well-rounded education that prepares them for post high school life. The success of the school is indicated by the graduation rate, which is above 90%. Greater yet in the effort to eliminate poverty is that 80% of the students continue on to obtain a post secondary education or on to a vocational training program.

Students participating in the program complete an internship, community service learning hours, and have an opportunity to complete a college course. UHS in collaboration with ABCD Head Start facilitates an Early Childhood Education pathway with seminar, internship, and college course opportunities. In addition, UHS has implemented a mentor program, matching students with mentors in the community whose careers reflect the students' career goals. Technology is integrated into all content area curricula at University High School. Every classroom is equipped with a state-of-the-art computer that includes a mobile media lab with media creation and editing capacities. In addition, UHS's library is equipped with a video-conference system and UHS maintains a fully functional computer lab. The program also facilitates after-school and summer activities. In collaboration with the Private Industry Council, Rewarding Youth Achievement Grant, and the Learning Community Group, UHS implements a Media Project training students in the latest media technology and videography. In collaboration with the National Foundation for Teaching Entrepreneurship (NFTE), UHS facilitates an NFTE program training students in the elements of entrepreneurship culminating in the creation of a business plan. And finally,

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Diploma Plus, a pilot program funded through the Corporation for Business Work and Learning by the Stratford Foundation enables high-risk, inner-city youth to earn a regular high school diploma, improve their academic and interpersonal skills significantly beyond what a GED requires, earn college credit, and receive real life experience in the workplace or through community service. Students complete an off-site college course, an 80-hour career-related internship, and two major projects including a community action project and a comprehensive autobiography.

UHS aims to move the youth from the cultural isolation of their neighborhood and provides them with a cross-cultural experience while teaching them. The University High School receives Community Services Block Grant (CSBG) funding, along with funding from City of Boston/Alternative Education, U.S. Department of Labor/Youth Opportunity Workforce Investment Act, Boston Public Schools, and Cambridge Public Schools. The school's added advantage is that it is run by a Community Based Organization with the ability to coordinate resources from a very diverse pool of funding sources. The students and their families benefit from many services provided by ABCD, some of which are directly funded by the Community Services Block Grant (CSBG) program.

Certified Nurse's Aid Program (C.N.A)

The typical client coming into Community Action, Inc.'s (CAI – Haverhill, Massachusetts) Certified Nurse's Aide Program is low-income, often receiving benefits through the Massachusetts Department of Transitional Assistance (DTA), or has exhausted unemployment benefits. The client is usually, though not always, a female head-of-household. The average age is mid 30's. Recently, older women who have lost their jobs in the manufacturing industry have been applying for training. Most of these clients either do not have high school diplomas or GEDs or may be reading and writing at a grade level that precludes them from other training programs. For at least half of these clients, lack of adequate English speaking skills is a major barrier in obtaining employment. Combined with issues such as housing needs, transportation, and childcare, clients often see these issues as insurmountable barriers to employment. Public transportation is limited, and on weekends and at night non-existent. Affordable childcare for late shifts or weekends limits the client's ability to maintain employment. In addition, some of the participants are homeless, living in shelters, and have been victims of domestic abuse.

Community Action, Inc.'s Certified Nurse's Aide Training Program has provided skills training, remedial academics, and supportive services to low-income individuals since 1993. Successful participants (more than 90% of enrolled participants) have completed the program, passed the state certification testing and gained employment in long-term facilities throughout the Merrimack Valley. An intensive hand on practice and continuous review assures the participants that they have the skills necessary to do their job. Local long-term

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care facilities have come to expect that graduates of this program have the skills needed to perform competently.

The impact of the program on individual clients and that client's family can be seen with a brief snapshot of some of the participants. Joanne (not her real name) entered the program after her transitional assistance benefits had been exhausted. She has two children. Joanne did not complete high school. She dropped out because of a pregnancy. After completing the program, Joanne found employment in a local nursing home. After working there for several months, she received an increase in pay and is currently receiving \$10.55/hour. This has allowed her to move her family to better housing. Throughout, Joanne worked hard and was determined to improve her family's situation. Since she became employed, her teenaged son has also gained employment at the same nursing home (part-time) and is contributing to the family income. He has also returned to school to complete his education. She credits this to her own success in the program and the role model she is able to provide now that she is working.

Another participant in this program is a 21-year-old single mother. When Maria (not her real name), entered the program she had not completed high school and was receiving transitional assistance. Through the program, she learned the skills and gained the certification she needed to become employed. She also received support from the staff in completing the requirements for the GED. She has been employed since June 2001, and has been pursuing an R.N. Degree at Northern Essex Community College in Haverhill, Massachusetts. She has been able to receive support from her family for childcare while she works and goes to school. She is doing well in her courses, even though going to school, working, and caring for a young child is challenging. She has gained confidence through her successful completion of the C.N.A. training program and increased her self-esteem by being able to provide for her child. Her chances for obtaining a well paying career are excellent.

This program has been a successful route for low-income individuals with multiple barriers to access skilled employment that leads to self-sufficiency and moves them beyond poverty status. The support and soft skills that they receive along with the skills training provide them with the tools necessary for job retention. Many of the participants develop strong support networks with the other students in the program. These provide additional support once the student leaves the program and is employed.

In addition to offering participants the skills they need to find employment, the C.N.A. program provides them with the support they need to access childcare, housing, and transportation. Sometimes this support is listening to clients' frustrations. At other times, it is assisting the participant to connect with the appropriate agency, attend appointments or think through a plan of action. The case manager who works with each participant provides follow-up support to the participants once they are employed to make sure that the systems that have

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been put into place during the training have continued. This support is unique to this training program and is considered an essential part of its success. Case management is a vital aspect of the C.N.A. program.

The local economy has become reliant on the C.N.A. program to provide a steady stream of qualified and well-trained employees. Each training cycle, local employers clamor to hire graduates of the program. Annually approximately 20 to 30 graduates enter the local workforce and help maintain quality health care for the Long Term Care industry in the area.

Community Action, Inc., utilizes CSBG funds for case managers in the Community Services Department to provide assistance to clients with housing, nutrition, transportation, health care, child care needs help and to help them meet their other basic human needs. Without CSBG funds, the infrastructure of support services would not be easily available to trainees, oftentimes this determines whether participants are successful in the C.N.A. Program.

The Emergency Fuel Bank (EFB)

The Emergency Fuel Bank (EFB) of Hampshire Community Action Commission (HCAC – Northampton, Massachusetts) received a concerned call from a two-parent family with six children, ages one, three, four, eight, 12, and 15. With less than 1/8 of a tank of oil and temperatures below 32 degrees, this family was in danger of freezing in the next two days. The total annual income for this family of eight was \$25,000. They were applying for the Federal Food Stamp program but have at least a one-week waiting period before their application can be approved. Both parents were high school graduates. The family lived in Ware, Massachusetts, where employment opportunities were limited. The husband, recently laid off from his job, was attending school while he collected unemployment compensation. His goal was to increase his earning ability. The wife had been able to secure part-time work that she attended when the husband and older children were available to care for younger family members. This family was trying to move out of poverty but was in crisis as a result of their low-income level. The EFB was able to provide this family with \$250 worth of emergency heating oil within 24 hours of their call.

Between October 1, 2001 and September 30, 2002, HCAC's Emergency Fuel Bank served 204 Hampshire County households who were in danger of losing their home heating and had exhausted their federal fuel assistance allotment. Eighty-seven percent were concentrated in six of Hampshire County's 23 communities, in the following order: Ware (27%); Amherst (21%); South Hadley (11%); Northampton (10%); Belchertown (9%); Easthampton (9%). The remaining 17 communities were represented by 1 to three households each. Seventy percent (70%) of households served had children, and of those households, forty-seven percent (47%) were headed by single, female heads of household.

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The single most common barrier callers face is the inability to earn sufficient income to pay for heating needs. Lack of public transportation in Hampshire County's rural communities impedes callers' ability to search for and/or attend work, this is particularly prevalent in the most widely served community, Ware, where no public transportation exists, as well as in the western hill town region. Lack of affordable childcare impacts both single and two parent families. Furthermore, the waiting list for a subsidized daycare slot is approximately three years. The second most frequently seen barrier is the inability of many callers to utilize budget plans with local utility vendors. This results in the accrual of large, back balances with electric or metered gas companies that supply energy to heat peoples' homes. Almost 50% of callers receive information about budgeting issues. While many callers agree to participate in a budget plan, they are frequently unable to make payments due to competing needs for food, shelter, and medical care. Despite moratoriums, utility companies often shut off heat after a prolonged period of missed payments.

These support services are funded by HCAC's CSBG grant, the BATON grant through the Massachusetts Executive Office of Health and Human Services, and by funds raised from the local community.

Advocacy for Affordable Housing

On August 9, 2001, the City Council in Quincy Massachusetts voted in favor of an Inclusionary Zoning Ordinance that would require housing developers building 10 or more units of housing to set aside 10% of the units as affordable housing or put 50% of the total development cost for 10% of the units into a trust fund for future affordable housing development. The passage of the mandatory affordable housing requirement placed the City of Quincy among other Greater Boston communities, including Cambridge, Boston, Brookline and Newton, that mandate a portion of all housing development be designated as affordable.

Quincy Community Action Programs, Inc., (QCAP – Quincy, Massachusetts) played a lead role in working with other Community Based Organizations and residents to advocate for passage of the ordinance and helped draft the Inclusionary Zoning Ordinance text. QCAP clients, board members, and staff spent hours in community meetings and public hearings testifying about the critical need for more affordable housing in Quincy. Their effort resulted in approval of the ordinance, which was signed into effect by the Mayor of Quincy on August 22, 2001. The ordinance is working. Currently, seventy-four units are in development under the ordinance and will be affordable for U.S. Department of Housing and Urban Development (HUD) eligible households, at up to 80% of the State Median Income. An additional 20 housing units are in the pipeline. This is good news in a city where the average rent for a two-bedroom apartment is now \$1,200 per month or greater - the median market price for a single family home in Quincy exceeds \$320,000.

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Funding for QCAP's housing program comes from a variety of federal, state, and private resources. CSBG funds paid a portion of salary for QCAP's executive director who took the lead responsibility of supporting the ordinance. The residents of Quincy will benefit from this activity – this will help keep Quincy an affordable place for people of all income levels.

Transition to Work program

North Shore Community Action Programs, Inc. (NSCAP – Peabody, Massachusetts) has a Transition to Work Program (TTW), which serves families at eight area homeless shelters. The program offers vocational assessment, educational and career goal setting, information and referral to education and job training programs, individual support and advocacy, exploration of non-traditional career opportunities, outreach to local employers, job placement and follow-up, and career development workshops. Direct client services such as matching funds for Individual Development Accounts (IDA) are also provided. It is a unique program because of the length of time these clients continue to receive services. TTW provides the most intensive services after a client is out of a shelter and in permanent housing. Clients may continue in the program for up to three years.

More recently, NSCAP began a *CyberSpace* program at which the TTW students take computer classes. Salem Community Cyber Space represents a collaboration of area non-profit organizations, public and private education, and human service providers who recognize the need for a safe port of entry for community members to begin their introduction and engagement with new technologies. It targets those Salem residents who do not have an easy or ready access to computers or the Internet and provides formal and informal computer related activities, beginning at a variety of starting points and offered to a broad cross-section of Salem and other North Shore community members. The goal is to bridge the *digital divide* that currently exists between, low-income and upper income Salem residents as well as the divide between English and non-English speakers.

Basic computer literacy is offered to those people who are not prepared to sit at a library or career center computer by themselves and need assistance with introductory computer use and skills. These classes target immigrants, English for Speakers of Other Languages/Adult Basic Education students, and other adult learners who need this transitional learning support, including NSCAP's own TTW program participants. In addition, *CyberSpace* also serves students who show interest and ability in computer-related skills and technologies and can engage in graduated classes in more advanced computer skills that may lead to employment in computer related industries or enhance skills that increase employability and create potential for self-employment. *CyberSpace* also provides classes, workshops, and training opportunities in

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technical computer skills areas where there is a growth in job opportunities and where entrepreneurial opportunities exist. These include but are not limited to: graphic design, web design, visual technology, and computer building, re-building, and repair. Finally, the Center will handle referrals from the Workforce Investment Board's Salem Career Center to assist those people who are not able to sit at the computer and access tools and research used in job search.

The TTW program is primarily funded by the U.S. Department of Housing and Urban Development, but also utilizes funds from CSBG and private foundations. Funding for administration of this program is difficult to acquire, so CSBG funds are necessary to pay staff salaries and benefits and provide oversight of the program, including supervision of college interns placed in the program. *CyberSpace* is primarily funded through the Department of Education and DHCD. The CSBG funding helped to offset the startup costs.

Community Technology Center

There are many low-income, ethnic, and linguistic minority individuals who are high school dropouts ages 16-25 and have math and reading skills levels below the 5th grade level. These individuals need Adult Basic Education to find employment and/or improve their basic skills. Many are not fluent in the English language. Some of them are families enrolled in Worcester Community Action Council, Inc.'s (WCAC - Worcester, Massachusetts) education programs who can, along with their children, participate in a Family Literacy Component that strengthens families. The technology project has been designed to tailor the needs of these individuals and families so that they can increase their limited computer skills or even receive training in more advanced computer application packages.

Recently, the CAA was awarded a Community Technology grant of \$193,000 from the U.S. Department of Education. WCAC will integrate the grant as part of its services available to low-income individuals and families in its service area. The goals of this comprehensive technology project are to implement technology as a tool and resource to increase the literacy skills of participants and their families, to offer an English for Speakers of Other Languages (ESOL) class, to integrate computer training into adult education, and to provide technological vocational training in computer programming and repair.

WCAC's General Education Diploma (GED) classes will utilize computer technology as a teaching tool and will participate in an introductory computer program to include *Microsoft Word*, *Excel*, *Outlook*, and *Internet Explorer*. In addition to these skills, a web page design component will be offered. Classes in advanced *Microsoft Office* applications are also available.

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WCAC's ESOL class has beginners, intermediate, and advanced levels of instruction to meet the singular needs of the students. Students will also be integrated into the computer classes according to skill levels.

Participants enrolled in WCAC's education programs can also participate in a Family Literacy Program whose aim is to have parents and children learn together, while having some fun and food.

ANECDOTAL EVIDENCE OF PEOPLE ACHIEVING SELF-SUFFICIENCY WHILE MEETING THEIR NEEDS

Adult Basic Education

Action Inc.'s (Action – Gloucester, Massachusetts) Adult Basic Education (ABE) class continues to be a positive experience for many area residents. The ABE class was started in the fall of 2001, in response to surveys revealing that 24% of the adult population in Gloucester did not have a high school diploma or GED. The purpose of the class is to help students acquire the skills needed for entry-level positions in today's workplace. Students are taught basic math, reading, and writing as well as developing and/or improving their computer skills. However, the class is about much more than simply acquiring skills. Many of the students have painful memories from prior classroom experiences. The ABE class provides an opportunity for them to re-enter the classroom and receive support and encouragement. By interacting with one another, students are able to realize that they are not alone in their struggles.

Robert came to the class after several years of employment at Le Pages, an area factory. After the factory closed its doors, he decided to join Action's ABE class while seeking employment. Although in his 50's, Robert still felt traumatized by his childhood classroom experiences. Suffering from an undiagnosed learning disability, he was placed in a special needs class where he received no education at all; instead his hours in school were spent doing crafts projects. After being frustrated for years, he finally dropped out of school at age 16. Robert was able to teach himself to read and maintain a long and stable employment history.

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It took a lot of courage for Robert to enter the classroom again, but he has consistently attended class for the past two years. His grades have steadily improved and he seems very pleased with his own progress. He particularly enjoys using the computer, which, he says he could not even switch on before beginning the class. Each month, Robert helps the class with a craft project and his enthusiasm has been an inspiration for students and teachers alike. Robert recently landed a full-time job through Action Employment and Training services. He plans on continuing his studies and working towards his ultimate goal – getting his GED.

Support from CSBG funded the planning and start up of all of Action's education, employment, and training programs that include services for at-risk youth, disabled adults, fishing families in transition, and unemployed and underemployed adults. CSBG enables multiple funding streams to be united under the roof of a one-stop agency, streamlining the process, ending duplication of services, and maximizing the benefit. Through integrated service delivery, the client progresses towards self-sufficiency instead of just receiving repeated emergency services.

Housing Advocacy

Mary had lived in Cambridge, Massachusetts for over 19 years. She is a 45-year-old single mother with a 16-year-old daughter and a 10-year-old son. She had worked at a local supermarket for over ten years and was a fulltime worker with full health benefits. However, when the supermarket was purchased by another company, she lost her fulltime job and her health benefits.

Shortly after Mary lost her fulltime employment, Mary's landlord decided to convert her building (where she lived for over 12 years) to condominiums. The landlord soon began eviction proceedings. In addition to being forced to move from her building, the conditions in her building began to deteriorate. Although Mary knew she needed to move, she needed a three-bedroom apartment for her family. Based on the family size, her subsidized housing certificate required that she use it for a three-bedroom apartment. The rent for a three bedroom in Cambridge was very expensive and she needed \$3,200 for the first and last month's rent and a security deposit. She also wanted to stay in Cambridge so that her daughter could finish her high school education in Cambridge.

Because of the conditions in her apartment and the building, Mary had to deposit her rent in an escrow account with the legal service office. When Mary came to Cambridge Economic Opportunity Council, Inc. (CEOC – Cambridge, Massachusetts) she had already been advised by other agencies that she was not eligible for any additional funds. Although she was not successful in finding another fulltime job she and her daughter worked at several part-time jobs.

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Mary was saving her money, preparing for the move she knew she had to make. She needed assistance in coordinating all aspects of the impending move.

CEOC started by contacting the current landlord and negotiating that the money in the escrow account should be given to Mary and her family so that they could secure another apartment. CEOC successfully argued that the landlord was not fixing the apartment for her to stay and the money should reasonably be used to assist with her displacement and relocation. After several negotiating sessions, the landlord agreed.

Along with what Mary had saved access to the escrow funds allowed her to seek matching funds from other agencies. Mary also sought additional jobs and continued to struggle to save money for her moving cost. Meanwhile, Mary lost several opportunities for a three bedroom apartments.

CEOC staff finally located an apartment for her in Somerville, the neighboring city. This meant that her son would not be able to continue in the Cambridge public schools. At least her daughter had graduated.

Unfortunately, the process began again for Mary as her Somerville landlord wanted to convert the building into condominiums. Her daughter became pregnant, so they needed to decide if they would seek a three-bedroom apartment as a family, or should they break up the family and look for two bedroom apartments given the expense of three bedrooms and knowing what they had just gone through. With CEOC staff assistance, they were again able to find a three-bedroom apartment so the family was able to stay together and her daughter was able to continue to live with her mom for help and support.

The new hurdle was not only finding a three bedroom that was affordable, but lead paint was now an issue. As in the first case, the ability of come up with first, last, and security deposit was very difficult. This time, Mary needed \$3,300. Mary was encouraged to file her tax return by herself, with some assistance from CEOC, as well as file for earned income tax credit.

Through no fault of her own, Mary was scheduled to move for the second time in six months. Although she was extremely determined to keep her family together, the stress was clearly wearing her down. She was losing some of her optimism. CEOC's intervention in this family's life kept them from becoming homelessness. The intervention also kept them together and safe. At present, the family is on the waiting list for public housing. Without her dedication and CEOC's advocacy, Mary and her family including her daughter's new born, would be homeless.

Staff support for the advocacy was funded by the CSBG program. Keeping people in homes is one of CEOC's critical intervention strategies for low-income people.

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Transitional Housing

Victoria is a single grandmother raising her grandchild. She was not employed, and was not receiving any income. She had no access to transportation, and her granddaughter was in serious need of medical attention due to numerous physical disabilities. In early fall of 2001, "Victoria" entered the Transitional Housing Program from *Safe Harbor*, a shelter for battered women operated by Community Action Committee of Cape Cod and Islands (CACCCI – Hyannis, Massachusetts). Victoria was homeless and was raising a granddaughter. They had been living in various motels before going to *Safe Harbor*. During the initial intake, Victoria received a thorough assessment of her situation and her granddaughter's goals and future needs, and then a service plan was completed. She was then offered placement in the Transitional Housing Program. Victoria and her granddaughter moved into a CACCCI unit and began working on their service plan. Since Victoria had no transportation, she usually walked to all appointments. She worked with her family aide and case manager to get all of her appointments for herself and her granddaughter who had numerous physical disabilities and needed many appointments for surgeries. The case manager assisted the family with a bus pass to help with the travel. A referral was made to Child and Family Services to begin counseling to work on self-esteem building. Victoria continued to see her psychiatrist and her counselor to address her mental health issues. Victoria made sure her granddaughter continued working with Early Intervention Services at Cape Cod Child Development. Victoria's goals were to open up a savings account for future use of as a security deposit, make payment arrangements for an old phone bill and contact Cape Organization for Rights of the Disabled (CORD) regarding disability compensation for her granddaughter. Because her granddaughter parents were incarcerated, she was unable to collect child support. Because of Victoria's willingness to work hard in the Transitional Housing Program, she was able to accomplish all of her goals. Victoria graduated from the program received a subsidized housing voucher and began looking for permanent affordable housing. She was able to obtain a phone in her name, save money for the security deposit, and helped correct many of her granddaughter's physical disabilities through surgery.

The Transitional Housing Program is partially funded by CSBG funds and it assists in providing opportunities to the Transitional Housing Program. Like the Transitional Housing program, CSBG is vital to many CACCCI programs. The grant provides assistance to the agency that enables it to fill in the gaps in services so that CACCCI can assist its clients in a comprehensive way. CSBG is an important part of CACCCI's mission to end the cause and condition of poverty.

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Mediation Services

Tammy is a 29-year old single mother of three children, ages two, five, and seven. She finished high school but decided not to go to college. She got married and began a family. After eight years, Tammy broke up with her husband. The husband is not paying any child support, Tammy is working with the court system to locate him and enforce a child support order. She lives in a subsidized apartment and works as a waitress. She is just barely able to get by with the help of Women, Infants, and Children (WIC), rent subsidy, childcare subsidy, and some Food Stamps.

Franklin Community Action Corporation's (FCAC – Greenfield, Massachusetts) Mediation and Training Collaborative first met Tammy in the small claims court summary (eviction) process. The landlord had asked for a mediated settlement as she was behind on her rent. The landlord wanted to rehabilitate the apartment building and raise the rent. She had been paying off her overdue rent but still was substantially behind. She wanted to stay, largely because she could not take her subsidy to a new apartment. In the process of mediation, she came to understand that she could not avoid leaving. With the help of the mediator, she was able to agree with the landlord on a payment plan to bring her rent up-to-date while still leaving enough for her to save towards a security deposit on a more affordable apartment. The landlord agreed to give her a good reference as long as she did not violate her agreement with him. Based on this mediated agreement, the court did not evict Tammy but left the case open. This meant that Tammy would leave - maybe not as soon as the landlord wanted -- and that the landlord would not have to reinstate proceedings if she did not follow through. This arrangement would not affect her credit rating and she would get a good reference from the landlord.

Five months later, Tammy found a smaller but more affordable apartment with heat included in the rent, making her finances still tight but easier to plan. Right around that time, the Department of Revenue completed paperwork to have child support deducted from her former husband's wages, and she knew that in a few months she would start getting regular child support. Due to the mediation, Tammy was able to maintain her housing and safely move to new housing – a process during which many families become homeless.

Summer Youth Works

For many low-income middle school and high school students, the summer brings with it a critical decision, whether to work in order to supplement their family's meager income and provide money to buy school clothes, supplies, and entertainment or whether to go to summer school to seek the remediation they know they need to maintain their academic standing. With the advent of the

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Massachusetts Comprehensive Assessment System (MCAS) and its linkage to high school graduation, this annual decision has become more important.

In collaboration with the Fitchburg and Leominster Public Schools and the North Central Massachusetts Chamber of Commerce, Montachusett Opportunity Council, Inc., (MOC – Fitchburg, Massachusetts) developed the *Summer Youth Works* program to address this need. The program assists low-income students from the ages of 14-17 who have been identified by their schools as at-risk for failing the MCAS test by providing with academic remediation in the morning and summer employment in the afternoon. MOC coordinates the program, recruits and certifies the participants, identifies and manages job placements, coordinates identification and funding of the employment opportunities, provides employability workshops, and provides case management for the students and their families, if required. The two school systems provide MCAS remediation programs in the morning and made job coaches available for the students. *Summer Youth Works 2002* provided academic remediation and employment for 57 at-risk youth. Members of the North Central Massachusetts Chamber of Commerce employed 45 youths within their own companies and contributed over \$9,000 to sponsor 12 additional jobs within local human service organizations. The jobs provided a wage of at least \$6.75 per hour and included clerical, ground maintenance, data entry, building maintenance, sales, waitpersons, telecommunications and lab assistant positions at 25 job locations. The program had an extraordinary 97% attendance rate for the morning academic remediation programs.

Josh is a typical participant of *Summer Youth Works 2002*. A low-income Fitchburg High School student between his sophomore and junior years, Josh had struggled with the MCAS test and was identified by the school as at-risk for failing the MCAS. Josh enrolled in the program and worked at a local pet store as an animal care technician. Based upon his job performance, he was offered additional weekend hours by his employer and continued to work part time at the store after the end of the program. At the same time, Josh maintained a 100% attendance record with the morning academic program. He has since successfully completed the MCAS and will be eligible for graduation in 2004. He is looking forward to his high school graduation and to continuing his education at a college as a biology major.

Case Management

The Self Help Inc.'s (SHI – Avon, Massachusetts) Scales and Ladders Project allowed the hiring of a part-time case manager who utilized a matrix developed by the Department of Housing and Community Development and CAAs in Massachusetts. SHI chose to serve a small number of low-income clients with intensive and continued case management services concentrating on young mothers, adolescents, elderly, and young fathers.

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The SHI Outreach Program referred an elderly client to the Scales and Ladders Case manager. Teresa who is 68 years old has guardianship of her six-year-old granddaughter. Teresa's only income is a small Social Security Check and a small check from DTA for her granddaughter. Teresa has a number of health problems, including asthma. She received a shut-off notice for electricity. It was July, and the extreme heat was having its affect on her breathing but Teresa could not afford an air conditioner.

The case manager did an intensive intake on Teresa and helped her find utility relief through several local charities including the Salvation Army, two area churches, and Old Colony Elderly Services. The case manager also contacted several area merchants and was able to obtain an air conditioner for Teresa – the local Youth Build Director and two of his students came to Teresa's house and installed the air conditioner.

The case manager then dealt with Teresa's isolation and her granddaughter's need to be with children her own age. Teresa was seeing a counselor to deal with depression. The case manager arranged for Teresa to meet with members of the Old Colony Elderly Services Retired Volunteer staff and she was soon qualified to participate in a program where she can work for an agency 20 hours a week and get paid for it by the Elderly Services at no cost to the agency. The problem was finding a sponsor agency to hire Teresa who had some limited office skills. However, she was bilingual in English and Spanish. The case manager talked to the site supervisor of the SHI Family and Parenting Center about hiring Teresa as a receptionist. The position of receptionist had been vacant over four months due to funding cuts. After an interview with Teresa, the site supervisor agreed to hire her. Soon Teresa became a vital part of the Center's team.

The case manager found a child care center for Teresa's granddaughter and a voucher for the cost of the childcare. In September, Teresa's granddaughter began 1st grade and since her work hours were from 9:00 AM to 2:00 PM, she was able to see her granddaughter off to school and be home when she returns. Teresa works four days a week, answering phones, making copies, and ordering supplies. Teresa has never been happier. She has climbed many steps in various scales of the Massachusetts Self-Sufficiency Scales and Ladders tool.

This activity was a combination of funding from CSBG and CSBG Special Projects (discretionary) funds.

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CSBG Scholarships Program

Many applicants and recipients of Tri-City Community Action Program, Inc.'s (Tri-CAP – Malden, Massachusetts) CSBG Scholarship program are foreign-born residents, striving to make a better life for themselves and their families. Recipients come from places such as Africa, Central America, and Southeast Asia, and appreciate the educational opportunities available in the United States. They also realize that English language skills are critical for employment and for full participation in the life of the community. Most of the foreign-born recipients take English language classes that will give them the foundation for content-area courses in either Early Childhood Education or Telecommunications.

One of the success stories is a Spanish-speaking young woman Matilde, who is a part of the Everett Community Partnership for Children (CPC) program. Matilde provides childcare services in her home. Through participation in the CPC, Matilde has been able to upgrade the quality of the early childhood education and care that she provides the children in her charge. Matilde has also gained professional skills and certification, while improving her English language skills. As a bilingual family childcare provider, Matilde meets a growing need in the Tri-city community.

Due to budget cuts, the CPC could no longer afford to offer its members as many staff development opportunities as in previous years. Matilde needed only a few courses to obtain an Associate's Degree in Early Childhood Education from Bunker Hill Community College and was not sure how she could continue to finance her education. Immediately following an announcement about CSBG Scholarship Program at a CPC meeting, Matilde applied and was accepted.

The scholarship helped Matilde to get her degree. When she graduated with her Associate Degree in May 2002, Matilde informed Tri-CAP that she will be continuing her education at Lesley College – this time without help from the CSBG Scholarship Program.

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CONCLUSION

Each year, millions of our residents turn to community-based organizations, like community action agencies to assist them in meeting their critical needs in the areas of housing, employment, childcare, education and literacy and many others while they strive towards self-sufficiency. As evidenced from this report, the CAAs in Massachusetts are playing a very important role in moving them from poverty to self-sufficiency, while meeting their many emergency needs. The CAA network not only provides direct services to low-income people, but also creates and maintains linkages and coordination of services with other community-based service providers. The CAA network's linkage with other service providers as well as with its funding sources such as DHCD is critical.

The CAAs are essential partners for DHCD in meeting its mission of improving the quality of life of low-income residents of the Commonwealth. Given the resource constraints, as experienced by non-profit and public sector organizations alike, the partnership between private and public sector entities is becoming more and more important in responding to the needs of thousands of low-income Massachusetts residents. As demonstrated in this report, DHCD, in collaboration with the CAA network in Massachusetts is at the forefront of a very important community action goal - helping low-income people become more self-sufficient.

DHCD welcomes comments and participation from its local, regional, and national partners to help Massachusetts be a better place to live.

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APPENDICES

- 1. CAA Profile - Resource Development**
- 2. The National Goals and Outcome Measures**
- 3. Department of Housing and Community Development
Outcome Measures**
- 4. List of CAAs**

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Appendix 1: CAA Profile – Resource Development

Table 1: Federal Resources	Fiscal Year 2001	Fiscal Year 2002
Community Services Block Grants (CSBG)	\$ 13,379,300.00	\$ 14,783,200.00
LIHEAP (Fuel Assistance)	\$ 91,191,571.00	\$ 57,859,285.00
Weatherization	\$ 5,406,567.00	\$ 5,243,634.00
LIHEAP - Weatherization	\$ 3,823,546.00	\$ 4,321,985.00
Head Start and Early Head Start	\$ 62,376,431.00	\$ 71,048,308.00
Older American Act	\$ 544,110.00	\$ 338,299.00
Social Services Block Grant	\$ 283,691.00	\$ -
Medicare/Medicaid	\$ 844,095.00	\$ 472,347.00
Community Food & Nutrition Program	\$ 65,133.00	\$ 68,991.00
Temporary Assistance to Needy Families	\$ 870,270.00	\$ 11,189,733.00
Child Care Development Block Grant	\$ 34,352,197.00	\$ 35,801,030.00
Other Resources from U.S HHS	\$ 11,337,606.00	\$ 4,354,440.00
Women Infants and Children (WIC)	\$ 7,065,506.00	\$ 6,425,826.00
Non Food Programs - USDA	\$ 1,779,009.00	\$ 1,415,157.00
Food Programs - USDA	\$ 2,712,661.00	\$ 2,479,501.00
Community Development Block Grant	\$ 459,679.00	\$ 652,439.00
Section 8 Housing Program	\$ 17,978,580.00	\$ 23,085,486.00
Section 202 Housing Program	—	\$ 92,498.00
All other Housing & Homelessness		
Prevention Programs	\$ 2,858,113.00	\$ 2,256,605.00
Employment and Training Programs	\$ 2,374,376.00	\$ 3,007,786.00
Other U.S Dept. of Labor Programs	\$ 536,357.00	\$ 292,452.00
Corporation for National Services Programs	\$ 1,892,176.00	\$ 2,137,366.00
Federal Emergency & Mgmt. Agency	\$ 445,292.00	\$ 439,654.00
Transportation Programs	\$ 14,271.00	\$ 0.00
All Other Federal Programs	\$ 1,260,924.00	\$ 1,076,779.00
Total Federal Resources	\$ 250,452,161.00	\$ 234,059,601.00

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Table 2: State Resources	Fiscal Year 2001	Fiscal Year 2002
Housing and Homeless Prevention Programs	\$ 13,898,499.00	\$ 12,573,449.00
Nutrition Programs	\$ 2,207,318.00	\$ 3,382,831.00
Day Care and Early Childhood Education Programs	\$ 99,258,624.00	\$ 99,204,919.00
Energy Programs	\$ 596,076.00	\$ 858,934.00
Health Programs	\$ 9,782,337.00	\$ 8,287,344.00
Youth Development Programs	\$ 2,694,519.00	\$ 1,874,620.00
Employment and Training Programs	\$ 2,137,253.00	\$ 1,956,126.00
Head Start Program	\$ 7,337,221.00	\$ 6,071,119.00
Programs for Senior Citizens	\$ 2,089,465.00	\$ 831,380.00
Transportation Programs	\$ -	\$ 1,912,993.00
Education Programs	\$ 1,590,179.00	\$ 2,110,116.00
Community/Economic Dev. Programs	\$ 20,000.00	\$ 174,576.00
Other State Resources	\$ 3,919,572.00	\$ 1,880,901.00
Total State Resources	\$ 145,531,063.00	\$ 141,119,308.00

Table 3: Local Public Sector Resources	Fiscal Year 2001	Fiscal Year 2002
Unrestricted Funds From Local Government	\$ 1,608,870.00	\$ 7,467,347.00
Value of Contract Services	\$ 10,398,924.00	\$ 8,841,897.00
Value of In-Kind Goods/Services Received	\$ 1,274,634.00	\$ 1,137,970.00
Total Local Public Resources	\$ 13,282,428.00	\$ 17,447,214.00

Table 4: Private Sector Resources	Fiscal Year 2001	Fiscal Year 2002
Foundations, Corporations, United Ways & Other Non-Profits	\$ 16,837,998.00	\$ 17,176,460.00
Other Donated Funds	\$ 1,369,705.00	\$ 1,885,331.00
Value of Other Donated Items, e.g., food, clothing, furniture	\$ 1,572,921.00	\$ 1,749,692.00
Value of In-Kind Resources Received from Businesses	\$ 2,361,692.00	\$ 2,874,071.00
Fees Paid By Clients for Services	\$ 9,392,810.00	\$ 4,209,840.00
Payments By Private Entities	\$ 8,757,165.00	\$ 6,642,893.00
Total Private Sector Resources	\$ 40,292,291.00	\$ 34,538,287.00

FY 2001 RESOURCES FROM ALL SOURCES²⁶: \$ 448,465,020.00
FY 2002 RESOURCES FROM ALL SOURCES: \$ 427,164,410.00

²⁶ A total of \$1,092,923 were subtracted from FY 2001 resources to avoid duplicated reporting.

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Appendix 2: National Goals and Outcome Measures

GOAL 1: (SELF-SUFFICIENCY) LOW-INCOME PEOPLE BECOME MORE SELF-SUFFICIENT

Direct measures:

- a. Number of participants seeking employment who obtain it [as compared with the total number of participants].
- b. Number of participants maintaining employment for a full twelve months.
- c. Number of households in which adult members obtain and maintain employment for at least ninety days.
- d. Number of households with an annual increase in the number of hours of employment.
- e. Number of households gaining health care coverage through employment.
- f. Number of households experiencing an increase in an annual income as a result of earnings.
- g. Number of households experiencing an increase in annual income as a result of receiving allowable tax credits, such as the earned income and childcare tax credits.
- h. Number of custodial households who experience an increase in annual income as a result of regular child support payments.
- i. Number of participating families moving from substandard housing into stable standard housing, as compared with the total number of participating families.
- j. Number of households which obtain and/or maintain home ownership.
- k. Number of minority households which obtain and/or maintain home ownership.
- l. Number of people progressing toward literacy and/or GED.
- m. Number of people making progress toward post-secondary degree or vocational training.
- n. Other outcome measure(s) specific to the work of your agency.

SURVEY QUESTION MEASURES:

- o. Number of clients who consider themselves more self-sufficient since participating in services or activities of the agency.
- p. Number of clients reporting an increase in income since participating in the services of the agency.

Scale measures:

- q. Number of households which demonstrated movement up one or more steps on a scale or matrix measuring self-sufficiency.
- r. Number of households achieving positive movement in self-sufficiency as demonstrated by an increase of at least one point in an overall score of a Family Development Scale.
- s. Number of households achieving stability in the _____ dimension of a Family Development Matrix.

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GOAL 2: (COMMUNITY REVITALIZATION) THE CONDITIONS IN WHICH LOW-INCOME PEOPLE LIVE ARE IMPROVED

Direct Measures:

- a. Number of accessible, living wage jobs created and/or retained.
- b. Increase in assessed value of homes as a result of rehabilitation projects.
- c. Increase in proportion of state and federal funds allocated for meeting emergency and long-term needs of the low-income population.
- d. Increase in access to community services and resources by low-income people.
- e. Increase in available housing stock through new construction.
- f. Increase in the availability and affordability of essential services, e.g. transportation, medical care, childcare.
- g. Other outcome measure(s) specific to the work done by your agency.

Survey question measures:

- h. Number of households who believe the agency has helped improve the conditions in which they live.

Scale measures:

- i. Number of communities which demonstrated movement up one or more steps on a scale or matrix measuring community self-sufficiency, community health, or community vitality.
- j. Number of communities achieving stability in the _____ dimension of the Community Scaling Tool.

GOAL 3: (COMMUNITY REVITALIZATION) LOW-INCOME PEOPLE OWN A STAKE IN THEIR COMMUNITY

Direct measures:

- a. Number of households owning or actively participating in the management of their housing.
- b. Amount of "community investment" brought into the community by the Network and targeted to low-income people.
- c. Increase in minority businesses owned
- d. Increase in access to capital by minorities
- e. Increased level of participation of low-income people in advocacy and intervention activities regarding funding levels, distribution policies, oversight, and distribution procedures for programs and funding streams targeted for the low-income community.
- f. Other outcome measure(s) specific to the work done by your agency.

Survey question measures:

- g. Number of households participating or volunteering in one or more groups.
- h. Number of households who say they feel they are part of the community.

Scale measures

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- i. Number of communities which demonstrated movement up one or more steps on a scale or matrix measuring community self-sufficiency, community health, or community vitality.
- j. Number of communities achieving stability in the _____ dimension of the Community Scaling Tool.

GOAL 4: PARTNERSHIPS AMONG SUPPORTERS AND PROVIDERS OF SERVICES TO LOW-INCOME PEOPLE ARE ACHIEVED

Direct measures:

- a. Number of partnerships established and/or maintained with other public and private entities to mobilize and leverage resources to provide services to low-income people.
- b. Number of partnerships established and/or maintained with other public and private entities to complete the continuum of care for low-income people.
- c. Number of partnerships established and/or maintained with other public and private entities which ensure ethnic, cultural, and other special needs considerations are appropriately included in the delivery service system.
- d. Other outcome measure(s) specific to the partnerships created by local agencies.

Survey question measures:

- e. Number of principal partners who are satisfied with the partnership.
- f. Partner's rating of the responsiveness of the agency.

Scale Measures:

- g. Number of agencies which demonstrated movement up one or more steps on a scale or matrix measuring agency partnership capacity.
- h. Number of agencies achieving stability in the _____ dimension of an agency partnership capacity scaling tool.
- i. Number of agencies that achieve and maintain commitments from other service and resource partners to carry out agency mission.
- j. Number of agencies that establish and maintain commitments to provide resources to partner organizations that serve agency customers.
- k. Number of agencies that establish and maintain coordination of agency and non-agency resources to create a programmatic continuum of services with outcome-based objectives establishes and maintains a selection process which ensures that low-income community members are elected in a public process.

GOAL 5: AGENCIES INCREASE THEIR CAPACITY TO ACHIEVE RESULTS

Direct measures:

- a. Total dollars mobilized by the agency.
- b. Total dollars mobilized by the agency as compared with CSBG dollars.
- c. Number of boards making changes as a result of a periodic organizational assessment.
- d. Number of programs which have become more effective as a result of research and data (their own as well as others).

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- e. Number of programs which have become more effective as a result of needs assessment surveys.
- f. Number of families having their situation improved as a result of comprehensive developmental services.
- g. Increase in community revitalization as a result of programs.
- h. Number of agencies increasing their number of funding sources and increasing the total value of resources available for services to low-income people.
- i. Number of agencies leveraging non-CSBG resources with CSBG resources at a ratio greater than 1:1.
- j. Number of agencies where board composition accurately represents the ethnic diversity of the service territory.
- k. Number of agencies where customers served accurately represents the ethnic diversity of the service territory.
- l. Number of agencies where staffing component accurately represents the ethnic diversity of the service territory.
- m. Number of development contacts as a result of outreach programs.
- n. Number of special populations showing improvement as a result of programs aimed at the population.
- o. Number of clients showing improvement as a result of emergency services received.
- p. Other outcome measure(s) specific to the work done by local agencies.

Scale measures:

- q. Number of agencies that achieve and maintain compliance with all applicable Federal, State, and local statutes, regulations, and requirements.
- r. Number of agencies that achieve and maintain a governance process that is inclusive, representative of, and accountable to the community.
- s. Number of agencies that achieve and maintain a workforce environment which empowers and develops its employees, has open communications, pays its employees a living wage, and is mission-driven.
- t. Number of agencies which achieve and maintain a planning, measurement, and evaluation system which creates a programmatic, continuum of services with outcomes-based objectives, and where the measurements of programs are used to improve services.
- u. Number of agencies that achieve and maintain communication and feedback processes that engage all stakeholders.
- v. Number of agencies that establish and maintain a process where evaluations are used to improve services.

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GOAL 6: (FAMILY STABILITY)

LOW-INCOME PEOPLE, ESPECIALLY VULNERABLE POPULATIONS, ACHIEVE THEIR POTENTIAL BY STRENGTHENING FAMILY AND OTHER SUPPORTIVE SYSTEMS

Direct measures:

- a. Number of aged households maintaining an independent living situation.
- b. Number of disabled or medically challenged persons maintaining an independent living situation.
- c. Number of households in crisis whose emergency needs are ameliorated.
- d. Number of participating families moving from homeless or transitional housing into stable standard housing.
- e. Number of households in which there has been an increase in donation of time to volunteer activities (not mandated by welfare-to-work programs).
- f. Number of households in which there has been an increase in children's involvement in extracurricular activities.
- g. Number of high consumption households realizing a reduction in energy burden.
- h. Number of households moving from cultural isolation to involvement with their cultural community.
- i. Other outcome measure(s) specific to the work done by your agency.

Survey question measure:

- j. Number of households indicating improved family functioning since participating in the services or activities of the agency.

Scale measures:

- k. Number of households moving from crisis to stability on one dimension of a scale.
- l. Number of households moving from vulnerability to stability on one dimension of a scale.
- m. Number of households moving from a condition of crisis to a condition of vulnerability on one dimension of a scale.

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Appendix 3: DHCD Outcome Measures

CHILD CARE & DAY CARE:	Number of parents able to train for, seek, obtain and/or maintain employment as a result of services.
HEAD START:	Number of children who experience healthy growth and development and whose families are strengthened through participation in Head Start.
FOOD AND NUTRITION PROGRAMS (E.G., FOOD PANTRIES; FOOD DISTRIBUTION PROGRAMS; FOOD STAMPS; FARMERS MARKET COUPONS; SUMMER FEEDING, CFNP; NUTRITION EDUCATION)	Number of households who have increased access to nutritious food and/or nutrition information and education. Number of households in crisis whose emergency needs are ameliorated.
WOMEN, INFANTS, AND CHILDREN (WIC):	Number of at-risk mothers who improve their pre-natal health and/or health of new born and young children through participation in the WIC program.
INFORMATION & REFERRAL (NON-EMERGENCY):	Number of requests for assistance that result in increased access to resources.
FIRST TIME HOMEBUYERS CLASSES:	Number of participants better able to negotiate a first time home purchase through successful completion of a first-time homebuyers program.
HOMELESSNESS PREVENTION PROGRAMS, INCLUDING HOUSING ASSISTANCE PROGRAM:	Number of participating families who are near-homeless or at-risk of homelessness who maintain their tenancy as a result of program intervention. Number of families placed in safe, permanent housing who maintain this status for at least six (6) months.

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Appendix 4: List of Community Action Agencies

Community Action Agencies	Location
Action for Boston Community Development, Inc.	BOSTON
Action, Inc.	GLOUCESTER
Berkshire Community Action Council, Inc.	PITTSFIELD
Community Action Agency of Somerville, Inc.	SOMERVILLE
Community Action Committee of Cape Cod & Islands	HYANNIS
Community Action, Inc.	HAVERHILL
Community Action Programs, Inter-City, Inc.	CHELSEA
Cambridge Economic Opportunity Council, Inc.	CAMBRIDGE
Citizens for Citizens, Inc.	FALL RIVER
Community Teamwork, Inc.	LOWELL
Franklin Community Action Corporation	GREENFIELD
Greater Lawrence Community Action Council, Inc.	LAWRENCE
Hampshire Community Action Commission	NORTHAMPTON
Lynn Economic Opportunity, Inc.	LYNN
Montachusett Opportunity Council, Inc.	FITCHBURG
North Shore Community Action Council, Inc.	PEABODY
People Acting in Community Endeavors, Inc.	NEW BEDFORD
Quincy Community Action Programs, Inc.	QUINCY
Self-Help, Inc.	AVON
South Middlesex Opportunity Council, Inc.	FRAMINGHAM
Springfield Partners for Community Action, Inc.	SPRINGFIELD
South Shore Community Action Council, Inc.	PLYMOUTH
Tri-City Community Action Program, Inc.	MALDEN
Valley Opportunity Council, Inc.	HOLYOKE
Worcester Community Action Council, Inc.	WORCESTER

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